

## INVENTOR SEARCH

=> fil capl; d que 122; fil medi; d que 143; fil embase; d que 165; fil wpix; d que 188; dup rem 145,122,188,165  
FILE 'CAPLUS' ENTERED AT 14:49:01 ON 20 SEP 2007  
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FILE COVERS 1907 - 20 SEP 2007 VOL 147 ISS 13  
FILE LAST UPDATED: 19 SEP 2007 (20070919/ED)

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'QBI' IS DEFAULT SEARCH FIELD FOR 'CAPLUS' FILE

L1	1	SEA FILE=CAPLUS ABB=ON	US2006-567406/AP
L2	608	SEA FILE=CAPLUS ABB=ON	HOLST LANGE B?/AU OR LANGE B?/AU OR
		HOLST B?/AU	
L3	1134	SEA FILE=CAPLUS ABB=ON	HANSEN C?/AU
L4	1	SEA FILE=CAPLUS ABB=ON	COPENHAGEN H?/AU
L5	471	SEA FILE=CAPLUS ABB=ON	NILSSON H?/AU
L7	1	SEA FILE=CAPLUS ABB=ON	304853-26-7
L8	75	SEA FILE=CAPLUS ABB=ON	17/D
L21	5	SEA FILE=CAPLUS ABB=ON	(L12 OR L3 OR L4 OR L5) AND L8
L22	5	SEA FILE=CAPLUS ABB=ON	(L1 OR L21)

FILE 'MEDLINE' ENTERED AT 14:49:01 ON 20 SEP 2007  
FILE LAST UPDATED: 19 Sep 2007 (20070919/UP). FILE COVERS 1950 TO DATE.

This file contains CAS Registry Numbers for easy and accurate substance identification.

L24	471	SEA FILE=MEDLINE ABB=ON	HOLST LANGE B?/AU OR LANGE B?/AU OR
		HOLST B?/AU	
L25	845	SEA FILE=MEDLINE ABB=ON	HANSEN C?/AU
L26	300	SEA FILE=MEDLINE ABB=ON	COPENHAGEN H?/AU OR NILSSON H?/AU
L28	2304	SEA FILE=MEDLINE ABB=ON	GHRMLN
L43	9	SEA FILE=MEDLINE ABB=ON	(L24 OR L25 OR L26) AND L28

L60	2434	SEA FILE=EMBASE ABB=ON	GHRMLN/CT
L61	7	SEA FILE=EMBASE ABB=ON	GHRMLN DERIVATIVE/CT
L62	410	SEA FILE=EMBASE ABB=ON	HOLST LANGE B?/AU OR LANGE B?/AU OR
L63	638	SEA FILE=EMBASE ABB=ON	HANSEN C?/AU
L64	259	SEA FILE=EMBASE ABB=ON	COPENHAGEN H?/AU OR NILSSON H?/AU
L65	8	SEA FILE=EMBASE ABB=ON	(L62 OR L63 OR L64) AND (L60 OR L61)

L60	2434	SEA FILE=EMBASE ABB=ON	GHRMLN/CT
L61	7	SEA FILE=EMBASE ABB=ON	GHRMLN DERIVATIVE/CT
L62	410	SEA FILE=EMBASE ABB=ON	HOLST B?/AU
L63	638	SEA FILE=EMBASE ABB=ON	HANSEN C?/AU
L64	259	SEA FILE=EMBASE ABB=ON	COPENHAGEN H?/AU OR NILSSON H?/AU
L65	8	SEA FILE=EMBASE ABB=ON	(L62 OR L63 OR L64) AND (L60 OR L61)

FILE 'WPIX' ENTERED AT 14:49:02 ON 20 SEP 2007  
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FILE LAST UPDATED:	14 SEP 2007	<20070914/UP>
MOST RECENT THOMSON SCIENTIFIC UPDATE:	200759	<200759/DW>
DERWENT WORLD PATENTS INDEX SUBSCRIBER FILE, COVERS 1963 TO DATE		

>>> Now containing more than 1 million chemical structures in DCR <<<		
>>> IIC Reform backfile reclassification has been loaded to 31 May 2007. No update date (UP) has been created for the reclassified documents, but they can be identified by 2006101/UPIC and 20061231/UPIC and 20066101/UPIC. <<<		
>>> Indian Patent publication number format enhanced in DPPI - see NEWS <<<		
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L74	191	SEA FILE=WPIX ABB=ON	HOLST LANGE B?/AU OR LANGE B?/AU OR
		HOLST B?/AU	
L75	453	SEA FILE=WPIX ABB=ON	HANSEN C?/AU
L76	157	SEA FILE=WPIX ABB=ON	COPENHAGEN H?/AU OR NILSSON H?/AU
L77	1	SEA FILE=WPIX ABB=ON	L74 AND L75 AND L76
L79	3107	SEA FILE=WPIX ABB=ON	CACHEXIA/B1,ABEX OR CACHECTIC?/B1,ABEX
L80	570	SEA FILE=WPIX ABB=ON	B14-E11B/MC OR C14-E11B/MC
L81	212	SEA FILE=WPIX ABB=ON	GHRMLN/B1,ABEX
L82	542701	SEA FILE=WPIX ABB=ON	ANALOG?/B1,ABEX OR SECRETAGOG?/B1,ABEX

OR DERIVATI?/B1,ABEX  
 23 SEA FILE=WPIX ABB-ON L81(1A)L82  
 8 SEA FILE=WPIX ABB-ON (L74 OR L75 OR L76) AND (L84 OR (L81 AND  
 (L79 OR L80))  
 8 SEA FILE=WPIX ABB-ON (L87 OR L77)

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PROCESSING COMPLETED FOR L43  
 PROCESSING COMPLETED FOR L22  
 PROCESSING COMPLETED FOR L88  
 PROCESSING COMPLETED FOR L65  
 18 DUP REM L43 L22 L88 L65 (12 DUPLICATES REMOVED)  
 1.90 ANSWERS '1-9' FROM FILE MEDLINE  
 ANSWERS '10-14' FROM FILE CAPLUS  
 ANSWERS '15-17' FROM FILE WPIX  
 ANSWER '18' FROM FILE EMBASE

=> d iall 1-9; d ibib ab hitind 10-14; d iall abeq tech 15-17; d iall 18;  
 1.90 ANSWER 1 OF 18 MEDLINE ON STN  
 DOCUMENT NUMBER: 2007344081 MEDLINE Full-text  
 DOCUMENT ID: 17711869  
 TITLE: Identification of an efficacy switch region in the  
 ghrelin receptor responsible for interchange  
 between agonism and inverse agonism.  
 AUTHOR: Holst Birgitte; Mokroinski Jacek; Lang Manja;  
 Brandt Erik; Nygaard Rie; Frimurer Thomas M; Beck-Sickinger  
 Annette G; Schwarz Thue W

CORPORATE SOURCE: Laboratory for Molecular Pharmacology, The Panum Institute,  
 Blegdamsvej 3, University of Copenhagen, 2200 Copenhagen N,  
 Denmark.. b.holst@mpharm.dk  
 SOURCE: The Journal of biological Chemistry, (2007 May 25) Vol.  
 282, No. 21, pp. 15799-811. Electronic Publication:  
 2007-03-19.

PUB. COUNTRY: United States  
 DOCUMENT TYPE: Journal Article (JOURNAL ARTICLE)  
 (RESEARCH SUPPORT, NON-U.S. GOVT)  
 LANGUAGE: English  
 FILE SEGMENT: Priority Journals  
 ENTRY MONTH: 2007  
 ENTRY DATE: Entered STN: 12 Jun 2007  
 Last Updated on STN: 19 Jul 2007  
 Entered Medline: 18 Jul 2007

ABSTRACT:  
 The carboxyanidated wFWL peptide was used as a core ligand to probe the  
 structural basis for agonism versus inverse agonism in the constitutively

active ghrelin receptor. In the ligand, an efficacy switch could be built at the N terminus, as exemplified by AvFWL, which functioned as a high potency agonist, whereas KwFWL was an equally high potency inverse agonist. The wfw-containing peptides, as well as inverse agonists, were affected by receptor mutations covering the whole main ligand-binding pocket with key interaction sites being an aromatic cluster on transmembrane ('TM') -VI and -VII and residues on the opposing face of TM-III. Gain-of-function in respect of either increased agonist or inverse agonist potency or swap between high potency versions of these properties was obtained by substitutions at a number of positions covering a broad area of the binding pocket on TM-III, -IV, and -V. However, in particular, space-generating substitutions at position III:0 shifted the efficacy of the ligands from inverse agonism toward agonism, whereas similar substitutions at position III: 08, one helical turn below, shifted the efficacy from agonism toward inverse agonism. It is suggested that the relative position of the ligand in the binding pocket between this "efficacy shift region" on TM-III and the opposing aromatic cluster on TM-VI and TM-VII leads either to agonism, i.e. in a superficial binding mode, or it leads to inverse agonism, i.e. in a more profound binding mode. This relationship between different binding modes and opposite efficacy is in accordance with the Global Toggle Switch model for TM receptor activation.

CONTROLLED TERM:  
 Amino Acid Substitution  
 Animals  
 Binding Sites: GE, genetics  
 COS Cells  
 Cercopithecus aethiops  
 Humans  
 Ligands  
 \*Models, Molecular  
 Mutation, Missense  
 \*Peptides: CH, chemistry  
 Peptides: GE, genetics  
 Protein Binding: GE, genetics  
 Protein Structure, Secondary  
 \*Receptors, G-Protein-Coupled: AG, agonists  
 Receptors, G-Protein-Coupled: CH, chemistry  
 Receptors, G-Protein-Coupled: GE, genetics  
 Receptor-Activity Relationship  
 Structure-Activity Relationship  
 0 (Ligands); 0 (Peptides); 0 (Receptors,  
 G-Protein-Coupled); 0 (growth hormone secretagogue  
 receptor)

L90 ANSWER 2 OF 18 MEDLINE ON STN  
 ACCESSTION NUMBER: 20074061 MEDLINE Full-text  
 DOCUMENT NUMBER: PubMed ID: 1695833  
 TITLE: GPR39 signaling is stimulated by zinc ions but not by obestatin.  
 AUTHOR: Holst Birgitte; Egerod Kristoffer L; Schild  
 Enrico; Vickers Steve P; Chestham Sharon; Gerlach Lars-Ole;  
 Storjohann Laura; Stidien Carsten E; Jones Rob;  
 Beck-Sickinger Annette G; Schwartz Thue W  
 CORPORATE SOURCE: Laboratory for Molecular Pharmacology, The Panum Institute,  
 University of Copenhagen, Blegdamsvej 3, DK-2200  
 Copenhagen, Denmark.  
 Endocrinology, (2007 Jan) Vol. 148, No. 1, pp. 13-20.  
 Electronic Publication: 2006-09-07.  
 Journal code: 0375040. ISSN: 0013-7227.  
 United States  
 Journal Article (JOURNAL ARTICLE)  
 (RESEARCH SUPPORT, NOR-U.S. GOVT)  
 LANGUAGE: English

10/567406

## FILE SEGMENT: Abridged Index Medicus Journals: Priority Journals

ENTRY MONTH: 200702

ENTRY DATE: Entered STN: 21 Dec 2006

Last Updated on STN: 14 Feb 2007

Entered Medline: 13 Feb 2007

## ABSTRACT:

GPR39 is an orphan member of the ghrelin receptor family that recently was suggested to be the receptor for obestatin, a peptide derived from the ghrelin precursor. Here, we compare the effect of obestatin to the effect of Zn(2+) on signal transduction and study the effect of obestatin on food intake. Although Zn(2+) stimulated inositol phosphate turnover, cAMP production, arrestin mobilization, as well as cAMP response element-dependent and serum response element-dependent transcriptional activity in GPR39-expressing cells as opposed to mock-transfected cells, no reproducible specific binding of obestatin could be detected in two different types of GPR39-expressing cells using three different radioiodinated forms of obestatin. By quantitative PCR analysis, GPR39 expression was readily detected in peripheral organs such as duodenum and kidney but not in the pituitary and hypothalamus, i.e. presumed central target organs for obestatin. Obestatin had no significant and reproducible effect on acute food intake in either freely fed or fasted lean mice. It is concluded that GPR39 is probably not the obestatin receptor. In contrast, the potency and efficacy of Zn(2+) in respect of activating signaling indicates that this metal ion could be a physiologically relevant agonist or modulator of GPR39.

CONTROLLED TERM:

Arrestin, ME, metabolism

CHO Cells

COS Cells

Cercopithecus aethiops

Criceleinae

Cricetulus

Cyclic AMP: ME, metabolism

DNA-Binding Proteins: GE, genetics

DNA-Binding Protein: ME, metabolism

Eating: DE, drug effects

Gene Expression: PH, physiology

Genes, Reporter

Humans

Inositol Phosphates: ME, metabolism

Inteases: GE, genetics

Kidney: CY, cytology

Luciferases: GE, genetics

Mice

Mice, Inbred C57BL

Peptide Hormones: ME, pharmacology

Polymerase Chain Reaction

Receptors, G-Protein-Coupled: GE, genetics

\*Receptors, G-Protein-Coupled: ME, metabolism

Signal Transduction: DE, drug effects

\*Signal Transduction: PH, physiology

Transcription Factors: GE, genetics

Transcription Factors: ME, metabolism

Tritium: DU, diagnostic use

\*Zinc: ME, metabolism

Zinc: PD, pharmacology

10028-17-8 (Tritium): 60-92-4 (Cyclic AMP); 7440-66-6 (Zinc)

CAS REGISTRY NO.: 0 (DNA-Binding Proteins); 0 (GPR39 protein, 0 (Arrestin); 0 (DNA-Binding Proteins); 0 (GPR39 protein,

10/567406

human); 0 (Inositol Phosphates); 0 (Peptide Hormones); 0 (Receptors, G-Protein-Coupled); 0 (SRE Protein, human); 0 (Transcription Factors); 0 (obestatin, human); EC 1.13.12.- (Lipases); EC 2.7.7.- (Cre recombinase); EC 2.7.7.- (Integrases)

L90 ANSWER 3 OF 18 MEDLINE on STN DUPLICATE 5

ACCESSION NUMBER: 200649939 MEDLINE Full-text

DOCUMENT NUMBER: Published ID: 16798937

TITLE: Ghrelin receptor inverse agonists: identification of an active peptide core and its interaction epitopes on the receptor.

AUTHOR: Holst Birgitte; Lang Manja; Brandt Eriik; Bach Anders; Howard Andrew; Fimuruer Thomas M; Beck-Sickinger Annette; Schwartz Thue W

CORPORATE SOURCE: Laboratory for Molecular Pharmacology, The Panum Institute, University of Copenhagen, Blaagardsvej 3, DK-2200 Copenhagen, Denmark.. b.holst@molpharm.dk

SOURCE: Molecular Pharmacology, (2006 Sep) Vol. 70, No. 3, pp. 936-46. Electronic Publication: 2006-06-23. Journal code: 0026-895X.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal Article; (JOURNAL ARTICLE)

(RESEARCH SUPPORT, NON-U.S. GOV'T)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200609

ENTERED STN: 23 Aug 2006

Last Updated on STN: 29 Sep 2006

Entered Medline: 28 Sep 2006

ABSTRACT: [D-Arg1,D-Trp7,9-Leu11]Substance P functions as a low-potency antagonist but a high-potency full inverse agonist on the ghrelin receptor. Through a systematic deletion and substitution analysis of this peptide, the C-terminal carboxylated pentapeptide wFWLX was identified as the core structure, which itself displayed relatively low inverse agonist potency. Mutational analysis at 17 selected positions in the main ligand-binding crevice of the ghrelin receptor demonstrated that ghrelin apparently interacts only with residues in the middle part of the pocket [i.e., between transmembrane (TM)-III and TM-VI]. In contrast, the inverse agonist peptides bind in a pocket that extends all the way from the extracellular end of TM-II (AspII:20) across between TM-III and TM-VII to TM-V and TM-IV. The potency of the main inverse agonist could be improved up to 20-fold by a number of space-generating mutants located relatively deep in the binding pocket at key positions in TM-III, TM-IV and TM-V. It is proposed that the inverse agonists prevent the spontaneous receptor activation by inserting relatively deeply across the main ligand-binding pocket and sterically blocking the movement of TM-VI and TM-VII into their inward-bend, active conformation. The combined structure-functional analysis of both the ligand and the receptor allowed for the design of a novel, N-terminally Lys-extended analog of wFWLX, which rescued the high-potency, selective inverse agonism that was dependent upon both AspII:20 and GluII:9. The identified pharmacophore can possibly serve as the basis for targeted discovery of also nonpeptide inverse agonists for the ghrelin receptor.

CONTROLLED TERM: Amino Acid Sequence

Animals

Binding Sites

COS Cells

Cells, Cultured

*Cercopithecus aethiops*  
•Epitopes: ME, metabolism  
Humans

Ligands  
Models, Molecular  
Molecular Sequence Data  
Mutant Proteins: AG, agonists  
Mutant Proteins: CH, Chemistry  
Peptide Hormones: ME, metabolism  
Peptides: CH, chemistry  
Protein Binding  
Receptors, G-Protein-Coupled: AG, agonists  
Receptors, G-Protein-Coupled: CH, chemistry  
Structure-Activity Relationship  
Substance P: AA, analogs & derivatives  
Substance P: CH, chemistry

33507-63-0 (Substance P); 96736-12-8 (substance P,  
Ph(5)-Trp(7,9)-Leu(11)-)  
0 (Epitopes); 0 (Ligands); 0 (Mutant Proteins); 0 (Peptide  
Hormones); 0 (Peptides); 0 (Receptors, G-Protein-Coupled);  
0 (Ghrelin); 0 (growth hormone secretagogue  
receptor)

L90 ANSWER 4 OF 18 MIDLINE ON STN DUPLICATE 9

ACCESSION NUMBER: 2005456178 MEDLINE Full-text

DOCUMENT NUMBER: PubMed ID: 15905359

TITLE: Nonpeptide and peptide growth hormone secretagogues act  
both as ghrelin receptor agonist and as positive  
or negative allosteric modulators of ghrelin  
signaling.

AUTHOR: Holst Birgitte; Brandt Erik; Bach Anders; Heding

CORPORATE SOURCE: Anders; Schwartz Thue W  
Laboratory for Molecular Pharmacology, Department of  
Pharmacology, The Panum Institute, Bledsdamsvej 3, DK-2200,  
Copenhagen, Denmark. b. holst@mh.ku.dk

SOURCE: Molecular endocrinology (Baltimore, Md.), (2005 Sep) vol.  
19, No. 9, pp. 2400-11. Electronic Publication:

2005-05-19.

Journal code: 8801431. ISSN: 0888-8809.

PUB. COUNTRY: (COMPARATIVE STUDY)

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

(RESEARCH SUPPORT, NON-U.S. GOVT)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200512

ENTRY DATE: Entered STN: 27 Aug 2005

Last Updated on STN: 30 Dec 2005

Entered Medline: 29 Dec 2005

#### ABSTRACT:

Two nonpeptide (L692, 429 and MK-677) and two peptide [GH]-releasing peptide (GHRP)-6 and ghrelin] agonists were compared in binding and in signal transduction assays: calcium mobilization, inositol phosphate turnover, cAMP-responsive element (CRE) and serum-responsive element (SRE) controlled transcription, as well as arrestin mobilization. MK-677 acted as a simple agonist having an affinity of 6.5 nm and activated all signal transduction systems with similar high potency (0.2-1.4 nm). L-692, 429 also displayed a very similar potency in all signaling assays (25-60 nm) but competed with a 1000-fold lower apparent affinity for ghrelin binding and surprisingly acted as a positive allosteric receptor modulator by increasing

\*\*\*ghrelin\*\*\*'s potency 4- to 10-fold. In contrast, the potency of GHRP-6 varied 600-fold (0.1-61 nm) depending on the signal transduction assay, and it acted as a negative allosteric modulator of ghrelin signaling. Unexpectedly, the maximal signaling efficacy for ghrelin was increased above what was observed with the hormone itself during coadministration with the nonendogenous agonists. It is concluded that agonists for the ghrelin receptor vary both in respect of their intrinsic agonist properties and in their ability to modulate ghrelin signaling. A receptor model is presented wherein ghrelin normally only activates one receptor subunit in a dimer and where the smaller nonendogenous agonists bind in the other subunit to act both as coagonists and as either neutral (MK-677), positive (L-692, 429), or negative (GHRP-6) modulators of ghrelin function. It is suggested that an optimal drug candidate could be an agonist that also is a positive modulator of \*\*\*ghrelin\*\*\* signaling.

#### CONTROLLED TERM:

Allosteric Regulation

Amino Acid Sequence

Arrestin: ME, metabolism

Benzazepines: CH, chemistry

\*Benzazepines: PD, pharmacology

CREB-Binding Protein: ME, metabolism

Calcium: ME, metabolism

Humans

Indoles: CH, chemistry

\*Indoles: PD, pharmacology

Inositol Phosphates: ME, metabolism

Molecular Sequence Data

Molecular Structure

Oligopeptides: CH, chemistry

\*Oligopeptides: PD, pharmacology

Peptide Hormones: CH, chemistry

\*Peptide Hormones: PD, pharmacology

\*Receptors, G-Protein-Coupled: AG, agonists

Response Elements

Serum Response Element

Spiro Compounds: CH, chemistry

\*Spiro Compounds: PD, pharmacology

Tetrazoles: CH, chemistry

\*Tetrazoles: PD, pharmacology

Transcription, Genetic

14555-23-8 (L-692,429); 7440-70-2 (Calcium); 87616-84-0

(growth hormone releasing hexapeptide)

0 (Arrestin); 0 (Benzazepines); 0 (CREBPP protein, human);

0 (Indoles); 0 (Inositol Phosphates); 0 (L-163191); 0

(Oligopeptides); 0 (Peptide Hormones); 0 (Receptors,

G-Protein-coupled); 0 (Spiro Compounds); 0 (Tetrazoles); 0

(Ghrelin); 0 (growth hormone secretagogue receptors); EC 2.3.1.48 (CREB-Binding Protein)

DUPLICATE 10

MEDLINE on STN

MEDLINE Full-text

Published ID: 15383539

Common structural basis for constitutive activity of the

ghrelin receptor family.

Holst Birgitte; Holliday Nicholas D; Bach Anders;

Elling Christian E; Cox Helen M; Schwartz Thue W

Laboratory for Molecular Pharmacology, Department of

Pharmacology, The Panum Institute, University of

Copenhagen, Blegdamsvej 3, DK-2200, Copenhagen, Denmark..

b.holst@molpharm.dk

The Journal of biological chemistry, (2004 Dec 17) Vol. 279, No. 51, pp. 53806-17. Electronic Publication:

2004-09-21.

Journal code: 298518R. ISSN: 0021-9256.

United States

Journal: Article (JOURNAL ARTICLE)  
(RESEARCH SUPPORT, NON-U.S. GOV'T)

Language: English

Priority Journals

FILE SEGMENT: ENTRY MONTH: 200502

Entered STN: 29 Dec 2004

Last Updated on STN: 5 Feb 2005

Entered Medline: 4 Feb 2005

#### ABSTRACT:

Three members of the ghrelin receptor family were characterized in parallel: the ghrelin receptor, the neurotensin receptor 2 and the orphan receptor GPR39. In transiently transfected COS-7 and human embryonic kidney 293 cells, all three receptors displayed a high degree of ligand-independent signaling activity. The structurally homologous motilin receptor served as a constitutively silent control; upon agonist stimulation, however, it signaled with a similar efficacy to the three related receptors. The constitutive activity of the ghrelin receptor and of neurotensin receptor 2 through the G<sub>q</sub>, phospholipase C pathway was approximately 50% of their maximal capacity as determined through inositol phosphate accumulation. These two receptors also showed very high constitutive activity in activation of cAMP response element-driven transcription. GPR39 displayed a clear but lower degree of constitutive activity through the inositol phosphate and cAMP response element pathways. In contrast, GPR39 signaled with the highest constitutive activity in respect of activation of serum response element-dependent transcription, in part, possibly, through G12/13 and Rho kinase. Antibody feeding experiments demonstrated that the epitope-tagged \*\*ghrelin\*\* receptor was constitutively internalized but could be trapped at the cell surface by an inverse agonist, whereas GPR39 remained at the cell surface. Mutational analysis showed that the constitutive activity of both the \*\*ghrelin\*\* receptor and GPR39 could systematically be tuned up and down depending on the size and hydrophobicity of the side chain in position VI:16 in the context of an aromatic residue at VII:09 and large hydrophobic residue at VII:06. It is concluded that the three ghrelin-like receptors display an unusually high degree of constitutive activity, the structural basis for which is determined by an aromatic cluster on the inner face of the extracellular ends of TMs VI and VII.

CONTROLLED TERM:  
Animals  
COS Cells  
Cell Line  
Cyclic AMP: ME, metabolism  
DNA Mutational Analysis  
DNA, Complementary: ME, metabolism  
Dose-Response Relationship, Drug  
Enzyme-Linked Immunosorbent Assay  
GTP-Binding Protein alpha Subunits, G12-G13: ME,  
metabolism  
Humans  
Inositol Phosphates: ME, metabolism  
Ligands  
MAP Kinase Signaling System  
Microscopy  
Models, Molecular

Molecular Sequence Data  
Phosphatidylinositols: CH, chemistry  
Phospholipase C: ME, metabolism  
Phylogeny  
Protein Conformation  
Protein Structure, Secondary  
Protein Structure, Tertiary  
\*Receptors, G-Protein-Coupled: CH, physiology  
\*Receptors, G-Protein-Coupled: PH, physiology  
Receptors, Gastrointestinal Hormone: CH, chemistry  
Receptors, Gastrintestinal Hormone: ME, metabolism  
Receptors, Neuropeptide: CH, chemistry  
Receptors, Neuropeptide: ME, metabolism  
\*Receptors, Neurotensin: ME, metabolism  
Signal Transduction  
Transcription, Genetic  
Transfection

60-32-4 (Cyclic AMP)  
CAS REGISTRY NO.: 60-32-4 (Cyclic AMP)  
CHEMICAL NAME: 0 (GPR39 protein, human); 0 (DNA, Complementary); 0 (GPR39 protein, human); 0 (Inositol Phosphates); 0 (Ligands); 0 (Phosphatidylinositols); 0 (Receptors, G-Protein-Coupled); 0 (Receptors, G-Protein-Coupled); 0 (Receptors, Gastrointestinal Hormone); 0 (Receptors, Neuropeptide); 0 (Receptors, Neurotensin); 0 (Growth hormone secretagogue receptor); 0 (motilin receptor); EC 3.1.4.3 (Phospholipase C); EC 3.6.1.46 (GTP-Binding Protein alpha Subunits, G12-G13)

L90 ANSWER 6 OF 18 MEDLINE ON STN  
ACCESSION NUMBER: 2004164484 MEDLINE Full-text  
DOCUMENT NUMBER: DUPLICATE 11  
Published ID: 15058279  
Chemical Name: Constitutive ghrelin receptor activity as a signaling set-point in appetite regulation.  
Author: Holst Birgitte, Schwartz Thue W  
Corporate Source: Laboratory for Molecular Pharmacology, Department of Pharmacology, The Panum Institute, University of Copenhagen, 7TM Pharma A/S, Denmark.. b.holst@molpharm.dk  
Source: Trends in pharmacological sciences, (2004 Mar) Vol. 25, No. 3, PP. 113-7. Ref: 20  
Journal code: 7906158. ISSN: 0165-6147.  
Pub. Country: England: United Kingdom  
Language: English  
Document Type: General Review; (JOURNAL ARTICLE)  
Entry Month: Priority Journals  
Entry Date: Last Updated on STN: 20 Apr 2004  
Entered Medline: 19 Apr 2004  
Entered Medline: 19 Apr 2004  
Controlled Term:  
Animals  
\*Appetite: PH, physiology  
Eating: PH, physiology  
Humans  
Peptides Hormones: PH, physiology  
\*Receptors, G-Protein-Coupled: PH, physiology  
\*Signal Transduction: DE, drug effects  
0 (Peptide Hormones): 0 (Receptors, G-Protein-Coupled); 0 (ghrelin); 0 (growth hormone secretagogue receptor)  
Chemical Name:  
L90 ANSWER 7 OF 18 MEDLINE ON STN  
ACCESSION NUMBER: 2003514700 MEDLINE Full-text  
DUPLICATE 12

10/567406

PubMed ID: 12907757

High constitutive signaling of the ghrelin receptor--identification of a potent inverse agonist.

Holst Birgitte; Cyankiewicz Adam; Jensen Tine Halkjaer; Andersen Michael; Schwartz Thue W Laboratory for Molecular Pharmacology, Institute of Pharmacology, The Panum Institute, University of Copenhagen, DK-2200 Copenhagen, Denmark.

Molecular endocrinology (Baltimore, Md.), (2003 Nov) vol. 17, No. 11, pp. 2201-10. Electronic Publication: 2003-08-07.

Journal code: 8801431. ISSN: 0888-8809.

United States Journal: Article; (JOURNAL ARTICLE) (RESEARCH SUPPORT, NON-U.S. GOV'T)

English Language: Priority Journals FILE SEGMENT: 200407 Entered STN: 1 Nov 2003 Last Updated on STN: 14 Jul 2004 Entered Medline: 13 Jul 2004

**ABSTRACT:** Ghrelin is a GH-releasing peptide that also has an important role as an orexigenic hormone-stimulating food intake. By measuring inositol phosphate turnover or by using a reporter assay for transcriptional activity controlled by cAMP-responsive elements, the ghrelin receptor showed strong, ligand-independent signaling in transfected COS-7 or human embryonic kidney 293 cells. Ghrelin and a number of the known nonpeptide GH secretagogues acted as agonists stimulating inositol phosphate turnover further. In contrast, the low potency ghrelin antagonist, (D-Arg1,D-Phe5,D-Trp<sup>7,9</sup>,Leu11)-substance P was surprisingly found to be a high potency (EC<sub>50</sub> = 5.2 nm) full inverse agonist as it decreased the constitutive signaling of the \*\*\*ghrelin\*\*\* receptor down to that observed in untransfected cells. The homologous motilin receptor functioned as a negative control as it did not display any sign of constitutive activity; however, upon agonist stimulation the motilin receptor signaled as strongly as the unstimulated ghrelin receptor. It is concluded that the ghrelin receptor is highly constitutively active and that this activity could be of physiological importance in its role as a regulator of both GH secretion and appetite control. It is suggested that inverse agonists for the ghrelin receptor could be particularly interesting for the treatment of obesity.

CONTROLLED TERM: Amino Acid Sequence

Cell Line

Cercopithecus aethiops Cyclic AMP Response Element-Binding Protein: ME, metabolism

Humans Inositol Phosphates: ME, metabolism

Ligands Molecular Sequence Data

Molecular Structure

Obesity: ME, metabolism

Peptide Hormones: ME, metabolism

Phospholipase C: ME, metabolism

\*Receptors, G-Protein-Coupled: AG, agonists

Receptors, G-Protein-Coupled: AI, antagonists & inhibitors

Receptors, G-Protein-Coupled: CH, chemistry

\*Receptors, G-Protein-Coupled: ME, metabolism  
\*Receptors, G-Protein-Coupled: ME, metabolism

10/567406

Response Elements: GE, genetics  
\*Signal Transduction

0 (Cyclic AMP Response Element-Binding Protein); 0 (Inositol Phosphates); 0 (Ligands); 0 (Peptide Hormones); 0 (Receptors, G-Protein-Coupled); 0 (Ghrelin); 0 (Growth hormone secretagogue receptor); EC 3.1.4.3 (Phospholipase C)

L90 ANSWER 8 OF 18 MEDLINE on STN DOCUMENT NUMBER: 200737132 MEDLINE Full-text

DOCUMENT NUMBER: PubMed ID: 1748894

TITLE: GPR39 Splice variants versus antisense gene LYPD1: expression and regulation in gastrointestinal tract, endocrine pancreas, liver, and white adipose tissue.

AUTHOR: Egerod Kristoffer L; Holst Birgitte; Petersen Pia S; Hansen Jacob B; Mulder Jan; Hokfelt Tomas; Schwartz Thue W

CORPORATE SOURCE: Laboratory for Molecular Pharmacology, Department of Neuroscience and Pharmacology, University of Copenhagen, DK-2200 Copenhagen, Denmark.

DOCUMENT TYPE: Molecular endocrinology (Baltimore, Md.), (2007 Jul) Vol. 21, No. 7, pp. 1683-98. Electronic Publication: 2007-05-08.

JOURNAL CODE: 8801431. ISSN: 0888-8809.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal Article; (JOURNAL ARTICLE) (RESEARCH SUPPORT, NON-U.S. GOVT)

LANGUAGE: English

SOURCE: Priority Journals

FILE SEGMENT: 200407 Entered STN: 1 Nov 2003 Last Updated on STN: 14 Jul 2004 Entered Medline: 13 Jul 2004

ENTRY MONTH: 200407

ENTRY DATE: 200407

LAST UPDATED ON STN: 16 Aug 2007

ENTERED MEDLINE: 15 Aug 2007

ABSTRACT: G protein-coupled receptor 39 (GPR39) is a constitutively active, orphan member of the ghrelin receptor family that is activated by zinc ions. GPR39 is here described to be expressed in full-length, biologically active seven-transmembrane form, GPR39-1a, as well as in a truncated splice variant five-transmembrane form, GPR39-1b. The 3' exon of the GPR39 gene overlaps with an antisense gene called LYPD1 (Ly-6/PLAUR domain containing 1). Quantitative RT-PCR analysis demonstrated that GPR39-1a is expressed selectively throughout the gastrointestinal tract, including the liver and pancreas as well as in the kidney and adipose tissue, whereas the truncated GPR39-1b form has a more broad expression pattern, including the central nervous system but with highest expression in the stomach and small intestine. In contrast, the LYPD1 antisense gene is highly expressed throughout the central nervous system as characterized with both quantitative RT-PCR and *in situ* hybridization analysis. A functional analysis of the GPR39 promoter region identified sites for the hepatocyte nuclear factors 1alpha and 4alpha (HNF-1alpha and -4alpha) and specificity protein 1 (SP1) transcription factors as being important for the expression of GPR39. In vivo experiments in rats demonstrated that GPR39 is up-regulated in adipose tissue during fasting and in response to streptozotocin treatment, although its expression is kept constant in the liver from the same animals. GPR39-1a was expressed in white but not brown adipose tissue and was down-regulated during adipocyte differentiation of fibroblasts. It is concluded that the transactivation control mechanism, the tissue expression pattern, and *in vivo* response to physiological stimuli all indicate that the GPR39 receptor very likely is of importance for the function of a number of metabolic organs, including the liver, gastrointestinal tract, pancreas, and adipose tissue.

10/567406

## CONTROLLED TERM:

Check Tags: Male  
 Adipose Tissue: ME, metabolism  
 Adipose Tissue, Brown: ME, metabolism  
 Alternative Splicing  
 Amino Acid Sequence  
 Animals  
 \*Antisense Elements (Genetics)  
 Base Sequence  
 Cell Line  
 DNA Primers: GE, genetics  
 Diabetes Mellitus, Experimental: GE, genetics  
 Diabetes Mellitus, Experimental: ME, metabolism  
 Gastrointestinal Tract: ME, metabolism  
 Gene Expression Regulation  
 Humans  
 In Situ Hybridization  
 Islets of Langerhans: ME, metabolism  
 Liver: ME, metabolism  
 Models, Molecular  
 Molecular Sequence Data  
 Promoter Regions (Genetics)  
 RNA, Messenger: GE, genetics  
 RNA, Messenger: ME, metabolism  
 Rats  
 Rats, Wistar  
 Receptors, G-Protein-Coupled: CH, chemistry  
 \*Receptors, G-Protein-Coupled: GE, genetics  
 \*Receptors, G-Protein-Coupled: ME, metabolism  
 Reverse Transcriptase Polymerase Chain Reaction  
 Tissue Distribution  
 0 (Antisense Elements (Genetics)); 0 (DNA Primers); 0 (RNA, Messenger); 0 (Receptors, G-Protein-Coupled)

190 ANSWER 9 OF 18  
 MEDLINE ON STN  
 2006123975 MEDLINE Full-text  
 PubMed ID: 16511600  
 Ghrelin receptor mutations--too little height and  
 too much hunger.  
 AUTHOR:  
 Holst Birgitte; Schwartz Thue W  
 Laboratory for Molecular Pharmacology, Panum Institute,  
 University of Copenhagen, Copenhagen, Denmark.  
 SOURCE:  
 The Journal of clinical investigation, (2006 Mar) Vol. 116,  
 No. 3, pp. 631-41. Ref: 19  
 Journal code: 7802871. ISSN: 0021-9738.  
 Comment on: J Clin Invest. 2006 Mar;116(3):760-8. PubMed  
 ID: 16511605  
 PUB. COUNTRY:  
 United States  
 DOCUMENT TYPE:  
 Commentary  
 Journal; Article; (JOURNAL ARTICLE)  
 (RESEARCH SUPPORT, NON-U.S. GOVT)  
 General Review; (REVIEW)

LANGUAGE: English  
 FILE SEGMENT: Abridged Index Medicus Journals: Priority Journals  
 ENTRY MONTH: 200604  
 ENTRY DATE: Entered STN: 3 Mar 2006  
 Last Updated on STN: 7 Apr 2006  
 Entered Medline: 6 Apr 2006  
 ABSTRACT:  
 The ghrelin receptor is known from *in vitro* studies to signal in the absence of the hormone ghrelin at almost 50% of its maximal capacity.

But, as for many other 7-transmembrane receptors, the *in vivo* importance of this ligand-independent signaling has remained unclear. In this issue of the JCI, Pantel et al. find that a natural mutation in the ghrelin receptor, Ala40Glu, which is associated with a selective loss of constitutive activity without affecting ghrelin affinity, potency, or efficacy, segregates in 2 families with the development of short stature (see the related article beginning on page 160). By combination of the observations from this study with those related to the phenotype of subjects carrying another natural \*\*\*ghrelin\*\*\* receptor molecular-pharmacological properties, it is proposed that selective lack of \*\*\*ghrelin\*\*\* receptor constitutive signaling leads to a syndrome characterized not only by short stature, but also by obesity that apparently develops during puberty.

## CONTROLLED TERM:

\*Amino Acid Substitution: GE, genetics  
 Humans  
 \*Body Height: GE, genetics  
 Humans  
 \*Hunger: PH, physiology  
 Obesity: GE, genetics  
 Obesity: ME, metabolism  
 Obesity: PP, physiopathology  
 \*Peptide Hormones: ME, metabolism  
 Puberty: GE, genetics  
 Puberty: ME, metabolism  
 Receptors, G-Protein-Coupled: DF, deficiency  
 \*Receptors, G-Protein-Coupled: GE, genetics  
 Receptors, G-Protein-Coupled: PH, physiology  
 Signal Transduction: GE, genetics  
 Syndrome  
 0 (Peptide Hormones); 0 (Receptors, G-Protein-Coupled); 0 (ghrelin); 0 (growth hormone secretagogue receptor)

190 ANSWER 10 OF 18 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 3  
 ACCESSION NUMBER: 200610127 CAPLUS Full-text  
 DOCUMENT NUMBER: 144:445679  
 TITLE: Uses of growth hormone secretagogues in the treatment of individuals suffering from renal and/or liver failure  
 INVENTOR(S): Lange, Birgitte Holst; Schambrey, Hans T.; Nielsen, Tina Geritz  
 PATENT ASSIGNEE(S): Gastrotech Pharma A/S, Den.  
 SOURCE: PCT Int. Appl., 85 pp.  
 CODEN: PIXXD2  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2006045319	A2	-----	-----	-----
WO 200605319	A3	20060504	WO 2005-DK654	20051027
W: AE, AG, AL, AM, AT, AU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, CN, CO, CR, CU, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KN, KP, KR, KZ, LC, LR, LS, LT, LY, MA, MD, MK, MN, MW, SG, SK, SL, SM, SY, TJ, TM, TR, TT, TZ, UA, US, UZ, VC,				

VN, YU, ZA, ZM, ZW  
RW: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE,  
IS, IT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BW, GH,  
CF, CG, CL, CM, GA, GN, GO, GW, ML, MR, NE, SN, TD, TG, AM, AZ, BY,  
GM, KE, LS, MZ, NA, SD, SL, SZ, T2, UG, ZM, ZW  
EP 1812044 A2 20070801 EP 2005-796707 20051027  
R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE,  
IS, IT, LI, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, AL,  
BA, HR, MK, YU  
PRIORITY APPLN. INFO.: DK 2004-1654 A 20041027  
DK 2004-1655 A 20041027  
WO 2005-DK694 W 20051027

## OTHER SOURCE(S): MARPAT 144:445679

AB The invention relates to the use of a secretagogue compound for the preparation of a medicament for treatment of an individual suffering from renal failure and/or liver failure. Furthermore, the invention relates to a method for stimulating appetite, food intake and/or weight gain in an individual suffering from liver failure and/or renal failure, said method comprising administration of a secretagogue to said patient.

CC 5 (Mammalian Hormones)  
Section cross-reference(s): 15  
IT 304853-26-7, Ghrelin 304853-26-7D, Growth hormone secretagogue, -like compds. and salts

R1: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(uses of growth hormone secretagogues in treatment of individuals suffering from renal and/or liver failure)

L90 ANSWER 11 OF 18 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 4  
ACCESSION NUMBER: 2006-412018 CAPLUS Full-text  
DOCUMENT NUMBER: 144:104881  
TITLE: Use of a growth hormone secretagogue for increasing or maintaining lean body mass and/or for treatment of chronic obstructive pulmonary disease

INVENTOR(S): Lange, Birgitte Holst; Schamblys, Hans T.;  
Nielsen, Tina Geritz  
SOURCE: Gastrotech Pharma A/S, Den.  
PCT Int. Appl., 78 pp.  
CODEN: PIXXD2  
Patent: English

LANGUAGE: English  
FAMILY ACC. NUM. COUNT: 1  
PATENT INFORMATION:

PATENT NO. KIND DATE APPLICATION NO. DATE  
WO 200604514 A2 20060504 WO 2005-DK689 20051026  
WO 2006045314 A3 20070412  
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH,  
CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD,  
GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KP, KR, KZ,  
LC, LY, LR, LS, LT, LU, LV, MA, MD, MG, MN, MM, MX, MZ, NA,  
NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL,  
SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA,  
ZW

RW: BW, GH, GM, KE, LS, MN, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM,  
AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK,  
EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, TU, MC, NE, PL, PT,  
RO, SE, SI, SK, TR, BF, BU, CF, CG, CI, CM, GA, GN, GO, GW, ML,  
MR, NE, SN, TD, TG  
PRIORITY APPLN. INFO.: DK 2004-574 A 2004007

AB The author discloses the use of immunol. and non-immunol. biomols. that target human ghrelin or ghrelin-like compds. In one aspect, these biomols. comprise antibodies and/or affibodies for mediating appetite regulation in an individual by prolonging the serum half-life of ghrelin.

IC ICM C07K016-18  
CC 15-3 (Immunochemistry)

KG, KZ, MD, RU, TJ, TM, AP, EA, EP, OA  
PRIORITY APPLN. INFO.: DK 2004-1657  
DK 2005-242  
US 2005-653116P  
OTHER SOURCE(S): MARPAT 144:404881  
AB The present invention relates to a method for increasing or maintaining lean body mass in an individual in need thereof, by administering a secretagogue. The present invention also relates in another aspect to the use of a secretagogue for the production of a medicament for use in increasing or maintaining an individual's lean body mass, preferably in an individual suffering from, or at risk of suffering from, cachexia, such as cancer cachexia.  
IC ICM A61K  
CC 2.5 (Mammalian Hormones)  
IT 2582/9-04-8, Human Ghrelin 304853-26-7, Ghrelin 304853-26-7D,  
Ghrelin, salts and -like compds.  
R1: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(use of a growth hormone secretagogue for increasing or maintaining lean body mass and/or for treatment of chronic obstructive pulmonary disease)

L90 ANSWER 12 OF 18 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 6  
ACCESSION NUMBER: 20051066 CAPLUS Full-text  
DOCUMENT NUMBER: 143:385176  
TITLE: Prolonging the biological activity of human ghrelin secretagogue  
INVENTOR(S): Hansen, Christian  
PATENT ASSIGNEE(S): Gastrotech Pharma A/S, Den.  
SOURCE: PCT Int. Appl., 88 pp.  
CODEN: PIXXD2  
Patent: English  
LANGUAGE: English  
FAMILY ACC. NUM. COUNT: 1  
PATENT INFORMATION:  
PATENT NO. KIND DATE APPLICATION NO. DATE  
WO 2005097831 A2 20051020 WO 2005-DK241 20050407  
WO 2005097831 A3 20051222  
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, TZ, CA, CH,  
CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD,  
GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KP, KR, KZ,  
LC, LY, LR, LS, LT, LU, LV, MA, MD, MG, MN, MM, MX, MZ, NA,  
NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL,  
SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA,  
ZW

RW: BW, GH, GM, KE, LS, MN, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM,  
AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK,  
EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, TU, MC, NE, PL, PT,  
RO, SE, SI, SK, TR, BF, BU, CF, CG, CI, CM, GA, GN, GO, GW, ML,  
MR, NE, SN, TD, TG  
PRIORITY APPLN. INFO.: DK 2004-574 A 2004007

AB The author discloses the use of immunol. and non-immunol. biomols. that target human ghrelin or ghrelin-like compds. In one aspect, these biomols. comprise antibodies and/or affibodies for mediating appetite regulation in an individual by prolonging the serum half-life of ghrelin.

IC ICM C07K016-18  
CC 15-3 (Immunochemistry)

Section cross-reference(s): 1, 14, 63  
 IT 304953-26-ID, Ghrelin, derive.  
 RL: THU ('Therapeutic use'; BIOL (Biological study); USES (Uses)  
 (enhanced serum half-life of)

190 ANSWER 13 OF 18 CAPLUS COPYRIGHT 2007 ACS ON STN DUPLICATE 7  
 ACCESSION NUMBER: 2005:1123798 CAPLUS Full-text  
 DOCUMENT NUMBER: 143:0036  
 TITLE: Use of a secretagogue for the treatment of ghrelin deficiency

INVENTOR(S): Nilsson, Henrik; Lange, Birgitte Holst; Nilsen, Tina Gericz  
 Holst, Post, Clees; Nielsen, Den.  
 Gastrotech Pharma A/S, Den.  
 PCT Int. Appl., 83 pp.

CODEN: PIXXD2  
 PATENT TYPE:  
 LANGUAGE: English

PATENT ASSIGNEE(S):  
 FAMILY ACC. NUM. COUNT: 1  
 WO 2005097173 A2 20051020 WO 2005-DR237 20050407

PATENT INFORMATION:  
 PATENT NO.: WO 20051229

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH,  
 CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, ES, FI, GB, GD,  
 GE, GH, GM, HR, RU, ID, IL, KE, KG, KM, KP, KR, KZ,  
 LC, LY, IR, LS, LT, LU, LV, MA, MD, MG, MN, MK, MZ, NA,  
 NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL,  
 SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA,  
 ZM, ZW

RW: BW, GH, GM, KB, LS, MW, MZ, NA, SD, SL, SZ, TZ, VG, ZM, AM,  
 AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, CY, CZ, DE, DK,  
 EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, MC, NL, PL, PT,  
 RO, SE, SI, SR, TR, BF, BJ, CF, CG, CM, GA, GN, GQ, GW, ML,  
 MR, NE, SN, TD, TG

EP 174255 A2 20070117 EP 2005-71155 20050407

R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE,  
 IS, IT, LI, LT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, AL, BA,  
 HR, LV, MK, YU

PRIORITY APPN. INFO.: DK 2004-569 A 20040407

DK 2004-1656 A 20041027

WO 2005-DK237 W 20050407

OTHER SOURCE(S): MARPAT 143:400386

AB The present invention relates to the use of a growth hormone (GH) secretagogue, such as a ghrelin-like compound, for the preparation of a medicament for the prophylaxis or treatment of ghrelin deficiency, and/or undesirable symptoms associated therewith, in an individual at risk of acquiring partial or complete ghrelin deficiency resulting from a medical treatment and/or from a pathol. condition. The present invention also relates to use of a secretagogue compound for the preparation of a medicament for the prophylaxis or treatment of one or more of: loss of fat mass, loss of lean body mass, weight loss, cachexia, loss of appetite, immunological dysfunction, malnutrition, disrupted sleep pattern, sleepiness, reduction in intestinal absorption and/or intestinal mobility problems in an individual suffering from, or at risk of suffering from, ghrelin deficiency. Furthermore, the present invention relates to the use of a secretagogue, such as a ghrelin-like compound, for the production of a medicament for preventing weight increase in an individual either: (a) being converted from a hyperthyroidic state to

euthyroid state, or (b) in remission from being converted from a hyperthyroidic state to euthyroid state.

IC ICM A61K038-25  
 ICS A61P003-00, A61P005-14

CC 2-6 (Mammalian Hormones)  
 IT 304953-26-ID, Ghrelin, -like compds.

FL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(use of a secretagogue for treatment of symptoms associated with ghrelin deficiency caused by pathol. conditions)

L90 ANSWER 14 OF 18 CAPLUS COPYRIGHT 2007 ACS ON STN DUPLICATE 8  
 ACCESSION NUMBER: 2005:136591 CAPLUS Full-text

DOCUMENT NUMBER: 142:233847  
 TITLE: Uses of ghrelin-like secretagogues for treatment of ghrelin

cancer cachexia  
 Lange, Birgitte Holst; Hanten, Christin; Nilsson, Henrik  
 Gastrotech Pharma A/S, Den.  
 PCT Int. Appl., 148 pp.

COPEN: PIXXD2  
 PATENT TYPE:  
 LANGUAGE: English

INVENTOR(S):  
 PATENT ASSIGNEE(S):  
 SOURCE:

DOCUMENT TYPE:  
 LANGUAGE:  
 FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:  
 PATENT NO.: WO 2005014032

DATE: 20050517  
 DATE: 20050521

KIND: A2  
 DATE: 20050517  
 APPLICATION NO.: WO 2004-DK529

DATE: 20040406  
 DATE: 20040406

Patent  
 English

PATENT INFORMATION:  
 PATENT NO.: W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH,  
 CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, ES, FI, GB, GD,  
 GE, GH, GM, HR, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ,  
 LC, LY, IR, LS, LT, LU, LV, MA, MD, MG, MN, MK, MN, MZ,  
 NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL,  
 SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA,  
 ZM, ZW  
 RW: BW, GH, GM, KB, LS, MW, MZ, NA, SD, SL, SZ, TZ, VG, ZM, AM,  
 AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, CY, CZ, DE, DK,  
 EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, MC, NL, PL, PT,  
 RO, SE, SI, SR, TR, BF, BJ, CF, CG, CM, GA, GN, GQ, GW, ML,  
 MR, NE, SN, TD, TG  
 EP 174255 A2 20070117 EP 2005-71155 20050407  
 R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE,  
 IS, IT, LI, LT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, AL, BA,  
 HR, LV, MK, YU

DK 2004-569 A 20040407

DK 2004-1656 A 20041027

WO 2005-DK237 W 20050407

R: AT, BE, CH, DE, DK, ES, FR, GR, HU, IE, LU, NL, SE, MC, PT,  
 IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, HU, PL, SK, HR

CN 1863550 A 20061115 CN 2004-80029235 20040806

JP 2007523048 T 20070816 JP 2006-522237 20060303

CN 2006CN007084 A 20070622 IN 2006-CN784 20060303

US 2007037731 A1 20070215 US 2006-567406 20060303

PRIORITY APPN. INFO.: DK 2003-1139 A 20030806

DK 2003-1140 A 20030806

US 2003-494815P P 20030814

US 2003-494816P P 20030805

DK 2003-1283 A 20031024

DK 2003-1569 A 20031024

DK 2003-1570 A 20040407

DK 2004-570 A 20040407

WO 2004-DK529 W 20040506

OTHER SOURCE(S): MAPAT 142:233847

AB The present invention relates, in one aspect, to the use of a secretagogue compound for the preparation of a medicament for the prophylaxis or treatment

of cancer cachexia in an individual in need of such treatment. In another aspect, the present invention relates to the use of a ghrelin-like compound for the preparation of a medicament for prophylaxis or treatment of cachexia in an individual by administering a s.c. dosage of said medicament to the individual. In a further aspect, the present invention relates to the use of a ghrelin-like compound or a pharmaceutically acceptable salt thereof for the preparation of a medicament for stimulation of appetite in an individual by administering a s.c. dosage of said medicament to the individual. Furthermore, the present invention relates to a number of new ghrelin-like compds. and uses thereof, as well as to pharmaceutical compds. and medical packaging comprising the new ghrelin-like compds.

IC ICM A61K038-25

CC C07K014-30; G01N033-74; A61P001-14

Section cross-reference(s): 34

IT 25279-04-8P 304853-26-7DP, Ghrelin, -like compds. 321974-68-9

P 843660-25-3P RL PAC (Pharmacological activity); SPN (Synthetic preparation); THU (Therapeutic use); BIOL (Biological study); PRP (Preparation); USES (uses)

(uses of ghrelin-like secretagogues for treatment of cancer cachexia)

L90 ANSWER 15 OF 18 WPIX COPYRIGHT 2007 THE THOMSON CORP on STN  
ACCESSION NUMBER: 2007-008841 [01] WPIX  
DOC. NO. CPI: C2007-003140 [01]  
TITLE: Novel growth hormone secretagogue receptor 1A ligand  
DERWENT CLASS: Compound useful for treating growth hormone secretagogue receptor 1A associated diseases such as cachexia  
INVENTOR: B04; B05; D13; D16  
PATENT ASSIGNEE: JENSEN P H; LANGE B H; SCHAMBYE H T  
(GAST-N) GASTROTECH PHARMA AS  
COUNTRY COUNT: 111

#### PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG	MAIN IPC
WO 2006058539	A2	20060608	(200701)*	EN	138[3]	

#### APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION DATE
WO 2006058539 A2		WO 2005-DK73 20051129

PRIORITY APPN. INFO: DK 2004-1875

INT. PATENT CLASSIF.: A61K [S]

BASIC ABSTRACT:

WO 2006058539 A2 UPAB: 20070102

NOVELTY - Growth hormone secretagogue receptor 1A (GHS-R1A) ligand compounds (I'), (I''), and (I'''), are new.

DETAILED DESCRIPTION - Growth hormone secretagogue receptor 1A (GHS-R1A) ligand compound is chosen from compound of formula (II): 22-(X3)n-(X2)-(X1)m-(X2)-(X3)n-22, compound of formula (III): 21-X1-X2-X3-X4-X5-X6-22, and compound of formula (IV): 21-R1-(X2)-(X3)n-22, or its salt. In formula (II):

Z1-Z2=optionally present protecting group; X1=amino acid; X2-anchor group, preferably amino acid being modified; X3=amino acids, in which at least one (X3) is a D-amino acid; Z3=optionally present linker or C-terminal group; m=0-3; and n=0-35, in which both n and m cannot be 0. In formula (I):  
Z1,Z2,X1=same as defined above; X2-anchor group chosen from amino acid being modified with glycerophospholipid, sphingolipid moiety, ceramide or its analog, isoprenoid pyrophosphate, glycosyl-phosphatidylinositol (GPI) anchor, or phosphatidyl serine or its analog, or alternatively X2 is chosen from L or D form of decenoic acid, Trp(5-NH2), 5-hexenoic acid, 6-heptenoic acid, 7-octenoic acid, 8-nonenanoic acid, Ala-3-cp, Ala-3-cb, Phe-4-Ne, Phe-4-Et, Phe-4-iPr, beta-MetTrp, Ala(3-(3-Quinolonyl)), Ala(3-(2-benzimidazoyl)), BenzoTrp and 7-NzaTrp; X3=amino acid; n=0-10, and m=0-10, and which m and n cannot both be 0. In formula (III):  
Z1,Z2=same as defined above; X1=amino acid having a structure of formula (B); X1=spacer with length of 1-8 chemical bonds; X3=hydrogen bond donor such as amine or hydroxyl group; X2,X3,X5=aromatic amino acids; X4=optionally present amino acid; and X6=optionally present and chosen from alcohol, ether, hydrocarbon, hydrazine, peptide and peptidomimetic moiety. Where at least one of X1-X5 is a D-amino acid. In formula (IV): R1=betaAla-, betaAla-XL-, GABA-XL-, aminobutyryl-X1, hydroxy acetic acid (HAA)-, HAA-XL-, or compound of formula (B); X7,X8=same as defined above; 21-(22,X1)same as defined above; X2-anchor group such as any amino acid being modified with a bulky group; X3=amino acid, or optionally an anchor group; and n=0-35.

INDEPENDENT CLAIMS are also included for: (1) pharmaceutical composition comprising the GHS-R1A ligand compound or its salt, and carrier, vehicles and/or excipients; (2) a medical packaging comprising one or more dosage units of the pharmaceutical composition; and (3) treatment comprising administering GHS-R1A ligand compound or its salt to an individual in need of treatment - Antidiabetic; Cardiант; Antiinflammatory; Cytostatic; Immunomodulator; Osteopathic; Endocrine-Gen.; Antithyroid; Anorectic; Eating-Disorders-Gen.  
Sprague-Dawley rats were used in the study. The animals were caged individually and fed with a commercial diet. All animals were allowed on an acclimatization period of minimum of 7 days prior to the commencement of the experiment. The animals were separated in six groups and each group was respectively treated twice daily with subcutaneous injection of sodium chloride solution (control), 200 micrograms/kg body weight of GTP-5 and GTP-6 (positive control), 50 or 200 micrograms/kg body weight of GTP-5 and GTP-6 (growth hormone secretagogue receptor 1A (GHS-R1A) ligand compound). The weight of the animals, and their food and water were recorded daily. The animals were killed and epididymal, subcutaneous and retroperitoneal fat pads were dissected and weighed. The ghrelin group gained significantly more weight than the saline group. Furthermore, the GTP-5 and GTP-6 groups showed higher weight gain and cumulative food intake than saline group. Ghrelin, GTP-5 and GTP-6 were found to induce an increase in subcutaneous fat depots.

MECHANISM OF ACTION - Modulator of GHS-R1A.  
USE - The GHS-R1A ligand compound or its salt, is useful for the preparation of medicament for the treatment and/or preventing GHS-R1A associated diseases such as cachexia in individuals suffering from disease (e.g. cancer, AIDS, cardiac failure, liver failure and chronic infection), heart failure, bone and cartilage related disease, bone fracture, inflammatory diseases, malignant disease, hyperthyroidism, obesity and diabetes, and in preparation of medicament for stimulation of appetite, food intake and/or weight gain, and for increasing body fat mass and/or lean body mass.  
ADVANTAGE - The anchor groups improve the anchorage of the GHS-R1A ligand in the cell membrane and thus improve the efficacy of GHS-R1A ligand. The GHS-R1A exhibits increase half-life in blood. DESCRIPTION OF DRAWINGS - The figure shows a

graph representing the total weight gain of rats treated with the growth hormone secretagogue receptor 1A ligand compound, saline or ghrelin. MANUAL CODE: CPI: B04-B01B; B04-C01H; B04-N04A; B04-N04E; B11-C06; B14-C03; B14-E11B; B14-E12; B14-H01; B14-L01; B14-L06; B14-N01; B14-N11; B14-S04; D03-H01T2; D05-H1TA

**TECH BIOTECHNOLOGY - Preparation (disclosed):** The GHS-RIA ligand compound is prepared by standard peptide synthesis and recombinant methods. Preferred Compound: The GHS-RIA ligand compound of formula (II) is chosen from compound of formula (IIa): Z2-(X3)n-(X2)-(X1)m-1-Gly-Z1, formula (IIa): Z2-(X3)n-(X2)-D-Ser(X2)-(X1)n-Z2, formula (IVa): Z2-(X3)n-(X2)-Gly-Z1, and formula (Va): Z2-(X3)n-D-Ser-Z3-Z1, preferably compound of formula (IIIA). The GHS-RIA ligand compound of formula (II) comprises a structure of formula (VIa'). R1=alcohol, ether, hydrocarbon, hydrazine, peptide or peptidomimetic moiety;

R3, R5=F or CH3;

R4=aromatic, hydrophobic or amphiphilic moiety;

R6=spacer with length of 1-8 chemical bonds; and

R7=hydrogen bond donor such as NH2 or OH.

The GHS-RIA ligand compound of formula (I) is chosen from a compound of formula (IIb): Z1-Gly-(X1)m-1-(X2)-(X3)n-Z2, formula (IIb); Z1-Gly-Ser-(X2)-(X3)n-Z2, and formula (IVb): Z1-Gly-(X2)-(X3)n-Z2, preferably compound of formula (IIb). The GHS-RIA ligand compound of formula (IV) is chosen from compound of formula (IIId): Z1-betaAla-Ser-(X2)-(X3)n-Z2, compound of formula (IIId): Z1-betaAla-(X2)-(X3)n-Z2, compound of formula (IVd): Z1-GABA-(X2)-(X3)n-Z2, compound of formula (VId): Z1-GABA-Ser-(X2)-(X3)n-Z2, compound of formula (VId): Z1-GABA-Ser-(X2)-(X3)n-Z2, and compound of formula (VId): Z1-HAA-(X2)-(X3)n-Z2, in which Z1 and Z2 are optional protecting groups. Preferred Compound: The composition further comprises transport molecules such as liposomes, micelles, isomeric and/or microspheres.

Preferred Medicament: The medicament comprises the GHS-RIA ligand compound or its salt as a lyophilisate, and the medicament further comprises a solvent, where the lyophilisate and the solvent are in separate compartments until administration. The medicament comprises a solution of the GHS-RIA ligand compound or its salt. The solvent is saline.

L90 ANSWER 16 OF 18 THE THOMSON CORP on STN

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DOC. NO. C006-104922 [33]

TITLE: Use of secretagogue compound in the preparation of medicament for stimulation of appetite, food intake and/or weight gain in transplantation patient B04  
INVENTOR: LANGE B; NIELSEN T; SCHAMBYE H T;  
PATENT ASSIGNEE: (GAST-N) GASTROTECH PHARMA AS  
COUNTRY COUNT: 111

#### PATENT INFORMATION:

PATENT NO	KIND	WEEK	LA	PG	MAIN IPC
WO 2006045313	A2	20060504 (200631)*	EN	741[0]	
EP 1812045	A2	20070801 (200753)	EN		

#### APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2006045313 A2		WO 2005-DK688 20051026	
EP 1812045 A2		EP 2005-DK6749 20051026	
EP 1812045 A2		WO 2005-DK688 20051026	

#### FILING DETAILS:

PATENT NO	KIND	PATENT NO	PATENT NO
EP 1812045	A2	Based on	WO 2006045313 A
			A

PRIORITY APPLN. INFO: DK 2004-1658

INT. PATENT CLASSIF.: A61K0038-22 [I,A]; A61K0001-00 [I,C]; A61P0001-14 [I,A]; A61K0038-22 [I,C]; A61P0001-00 [I,C]

#### BASIC ABSTRACT:

WO 2006045313 A2 UPAB: 20060523

NOVELTY - Use of a secretagogue compound in the preparation of a medicament for the stimulation of appetite, food intake and/or weight gain in a transplantation patient, is new. ACTIVITY - Anabolic.

#### MECANISM OF ACTION - None given.

USE - For the stimulation of appetite, food intake and/or weight gain in a transplantation (preferably lung, kidney, liver or heart transplantation) patient having a lean body mass of less than 80% (preferably less than 60%) of normal and/or body mass index below 17 kg/m<sup>2</sup> (claimed).

ADVANTAGE - The orexiogenic and metabolic effects of secretagogues, such as ghrelin, reduce the morbidity and mortality in patients undergoing organ transplantation, and improve their quality of life. The medicament increases body fat mass and/or lean body mass. MANUAL CODE: CPI: B04-J01; B14-E11

#### TECH

PHARMACEUTICALS - Preferred Compound: The secretagogue is ghrelin or its salt; or a ghrelin-like compound comprising a structure of formula Z1-Gly-(X2)-(X3)n-Z2 (I) or its salt (preferably of formula Z1-Gly-Ser-(X2)-(X3)n-Z2 (II)).  
21 and 22 = an optionally present protecting group;  
X1 = a naturally occurring and synthetic amino acid;  
X2 = a naturally occurring and synthetic amino acid that is modified with a bulky hydrophobic group (preferably acyl (preferably 1-15C acyl, especially 8-11C acyl) or a fatty acid) (preferably modified Ser, Cys or especially modified Ser);  
X3 = a naturally occurring and synthetic amino acid (preferably 25 amino acid sequences as given in the specification e.g. Phe-Leu-Ser-Pro-Glu-His-Gln-Arg-Lys-Glu-Ser-Lys-Lys-Pro-Pro-Ala);

m = 1 - 10 (preferably 1 - 9, especially 2);  
n = 0 - 35 (preferably 1 - 25, especially 1 - 10 or 15 - 24).

At least one of X1 and X3 may be modified with a bulky hydrophobic group (preferably an acyl or a fatty acid).

Preferred Medicament: The medicament is in the form of a formulation that comprises the secretagogue or its salt as a lyophilizate, and a solvent (preferably saline) in separate compartments until administration. The medicament is given until the lean body mass is more than 60% (preferably more than 80%, especially more than 90%) of normal.

Preferred Transplant: The transplant is a solid organ (preferably lung, heart, liver, kidney, pancreas, intestine or an extremity); hematopoietic stem cell transplantation (preferably bone marrow transplantation or peripheral blood stem cell transplantation); or a reconstructive plastic

surgery, such as reconstructive facial surgery, or reconstructive surgery after burns.

L90 ANSWER 17 OF 18 WPIX COPYRIGHT 2007 THE THOMSON CORP on STN  
ACCESSION NUMBER: C2005-214152 [72]  
DOC. NO.: CPI: 2005-703468 [72]

TITLE: Use of a secretagogue in combination with a growth hormone for the preparation of a medicament to treat or prevent, e.g., cardiac cachexia, cancer cachexia or the condition or frailty cachexia and acquired immunodeficiency syndrome wasting

DERWANT CLASS: B04; B07

INVENTOR: ISAKSSON O G P.; LANGE B H; NIELSEN T G; POST C

(GAST-N) GASTROTECH PHARMA AS

COUNTRY COUNT: 108

PATENT INFORMATION:

PATENT NO. KIND DATE WEEK LA PG MAIN IPC  
WO 2005097174 A2 20051020 (200572)\* EN 89[0]

APPLICATION DETAILS:

PATENT NO. KIND APPLICATION DATE  
WO 2005097174 A2 WO 2005-DK242 20050407  
INT. PATENT CLASSIF.: A61K0038-24 [I,A]; A61K0038-25 [I,C];  
IPC RECLASSIF.: A61K0038-25 [I,C]; A61K0038-27 [I,A]; A61K0038-27 [I,C];  
A61K0038-33 [I,C]; A61K0038-35 [I,A]

BASIC ABSTRACT:

WO 2005097174 A2 UPAB: 20051223  
NOVELTY - Use of a secretagogue (A) or its salts in combination with a growth hormone (B) or its salts for the preparation of a medicament.  
DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for: (1) a composition comprising (A) and (B) and/or their salts and carriers, vehicles and/or excipients; (2) a medical packaging comprising one or more dosage units of the composition; and (3) a method for monitoring the effect of a treatment of an individual with a secretagogue compound in combination with (B), comprising measuring the blood level in the individual of insulin like growth factor (IGF)-1, IGF-BP-3 and/or ALB. ACTIVITY - Immunomodulator; Anti-HIV; Cardiant; Cytostatic; Antilipemic; Endocrine-Gen.; Anabolic.

Mechanism of Action - Growth hormone secretagogue receptor 1a (GHS-R1a) ligand modulator. (A) was tested for its GHS-R1a ligand modulatory activity using biological assay. The results showed that the median effective concentration of (A) was less than 0.01 nM.

USE - (A) In combination with (B) is useful for the preparation of a medicament to treat or prevent pathological conditions or the condition of frailty, where the condition is cachexia (where the cachexia is associated with human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS) such as AIDS wasting) (cardiac cachexia, cancer cachexia (where the cancer is lung cancer, pancreatic cancer, liver cancer and a gastrointestinal tract cancers)) and lipoatrophy, stimulate appetite, food intake and weight gain, increase body fat mass and/or maintain lean body mass, treat dwarfism and/or growth retardation, that are caused by the individual having insufficient physiological levels of growth hormone (claimed).

10/567406  
ADVANTAGE - The combination of (A) and (B) has synergistic effect. MANUAL CODE: CPI: B04-B04D5; B04-C01G; B04-H01; B04-I06H; B04-J01;  
B04-J05; B04-N020E; B11-C06; B12-M1E; B12-M1F; B14-E1B; B14-F01;  
B14-F06A; B14-G01B; B14-H01; B14-S02

TECH PHARMACEUTICALS - Preferred Method: Treatment of cancer comprises administration of (A) in combination with (B) and an anti-neoplastic treatment (a chemotherapy medicament and/or radiotherapy). Treatment of AIDS wasting, cardiac cachexia or the condition or frailty comprises administration of the composition in combination with a NSAID medicament.  
Preferred Components: (B) Comprises a fully defined 748 amino acid SEQ ID No: 4-8) sequence given in the specification. (B) Is a mammalian growth hormone, growth hormone of a domestic animal (preferably somatotropin or its any isotoms, thyroid stimulating hormone, adrenocorticotrophic hormone, leutinizing hormone and/or follicle stimulating hormone) or their homologs, variants or functional equivalents. (B) Comprises a recombinant polypeptide. (B) Is monomeric human growth hormone (hGH), dimeric hGH, trimeric hGH, tetrameric hGH, pentameric hGH, non-covalent oligomers of hGH, disulfide oligomers of hGH, covalently linked hGH, 22K-hGBP complex, 22K-alpha2-macroglobulin complex, 20K-hGBP complex, hGH-V hGBP complex, hGH-22K, hGH-22K, Asn152-desamido-hGH-22K, Asn152-Glyco-hGH-V-glycosylated placental growth hormone. (A) Is ghrelin (human ghrelin), a ghrelin-like compound or their salts. The ghrelin-like compound comprises formulae of (X1)n-(X2)-(X3)n-22 [I], 21-Gly-(X1)n-1-(X2)-(X3)n-22 [II], 21-Gly-(X2)-(X3)n-22 [III] (preferred) or 21-Gly-(X2)-(X3)n-22 (IV).  
X1 = an optionally present protecting group,  
X2 = an amino acid (naturally occurring and synthetic amino acids)  
where the amino acid is modified with a bulky hydrophobic group, preferably an acyl group or a fatty acid) (preferably (X3)n comprises a sequence of (where (X3)n comprises a sequence of Phe-Leu-Ter-Pro-Glu-His-Gln-Phe-Leu-Ser-Pro-Glu-His, Phe-Leu-Ser-Pro-Glu, Phe-Leu-Ser-Pro-Phe);  
X3 = an amino acid (naturally occurring and synthetic amino acids)  
where the amino acid is modified with a bulky hydrophobic group, preferably an acyl group or a fatty acid) (preferably (X3)n comprises a sequence of (where (X3)n comprises a sequence of Phe-Leu-Ter-Pro-Glu-His-Gln-Phe-Leu-Ser-Pro-Glu-His, Phe-Leu-Ser-Pro-Glu, Phe-Leu-Ser-Pro-Phe);  
Where the acyl group is preferably 1-35C.  
Subcutaneous, Parenteral, nasal or pulmonary administration. The formulation further comprises a solvent (saline), where the lyophilizate and the solvent are in separate compartments until administration. The composition further comprises transport molecules, such as liposomes, micelles, lipids and/or microspheres. The medical packaging comprises 1-3 (preferably 3) dosage units or 7-21 (preferably 7, 14 or 21) dosage units. The medical packaging comprises instructions for administering the composition. The instructions includes instructions referring to administration of the composition during a meal or at the most 90 minutes prior to a meal, such as at the most 45 minutes prior to a meal, preferably immediately prior to a meal. The packaging is in the form of a cartridge, such as a cartridge for an injection pen.

L90 ANSWER 18 OF 18 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN 2006106751 EMBASE Full-text

ACCESSION NUMBER: 2006106751 EMBASE Full-text

TITLE: Ghrelin receptor mutations - Too little height and too much hunger.

AUTHOR: Holst B.; Schwartz T.W.

CORPORATE SOURCE: T.W. Schwartz, Laboratory for Molecular Pharmacology, Panum Institute, University of Copenhagen, Blegdamsvej 3, Copenhagen, Denmark. schwartz@nopharm.dk

SOURCE: Journal of Clinical Investigation, (1 Mar 2006) Vol. 116, No. 3, pp. 637-641.

Reis: 19

ISSN: 0021-9738 E-ISSN: 1558-8238 CODEN: JCINAO

COUNTRY: United States

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 003 Endocrinology

005 General Pathology and Pathological Anatomy

022 Human Genetics

LANGUAGE: English

SUMMARY LANGUAGE: English

ENTRY DATE: Entered STN: 22 Mar 2006

ABSTRACT: Last Updated on STN: 22 Mar 2006

The ghrelin receptor is known from in vitro studies to signal in the absence of the hormone ghrelin at almost 50% of its maximal capacity. But, as for many other 7-transmembrane receptors, the in vivo importance of this ligand-independent signaling has remained unclear. In this issue of the JCI, Pantel et al. find that a natural mutation in the ghrelin receptor, Ala>204Glu, which is associated with a selective loss of constitutive activity without affecting ghrelin affinity, potency, or efficacy, segregates in 2 families with the development of short stature (see the related article beginning on page 760). By combination of the observations from this study with those related to the phenotype of subjects carrying another natural ghrelin receptor mutation, Phe279Leu, having identical molecular-pharmacological properties, it is proposed that selective lack of ghrelin receptor constitutive signaling leads to a syndrome characterized not only by short stature, but also by obesity that apparently develops during puberty.

CONTROLED TERM: Medical Descriptors:

- \*short stature: ET, etiology
- \*obesity: ET, etiology
- hormone action
- hormone binding
- phenotype
- puberty
- food intake
- cross fertilization
- genetic analysis
- structure activity relation
- physiology
- energy expenditure
- developmental disorder: ET, etiology
- body growth
- gene mutation
- amino acid substitution
- hormone release
- heterozygosity
- ligand binding

review priority journal

Drug Descriptors:

- \*ghrelin receptor: EC, endogenous compound
- ghrelin: EC, endogenous compound
- G protein coupled receptor: EC, endogenous compound
- appetite stimulant: EC, endogenous compound
- unclassified drug (ghrelin) 258279-04-8, 304853-26-7

CAS REGISTRY NO. :

10/567406

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FILE LAST UPDATED: 19 Sep 2007 (20070919/ED)

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L10     1571 SEA FILE=CAPLUS ABB=ON WASTING/OBI
L11     20291 SEA FILE=CAPLUS ABB=ON APPETITE/OBI
L12     5750 SEA FILE=CAPLUS ABB=ON MALNUTRITION/OBI
L13     497406 SEA FILE=CAPLUS ABB=ON NEOPLAS?/OBI
L14     17    29 SEA FILE=CAPLUS ABB=ON 1B (L) (THU OR PAC OR PKT OR DMA) /RL
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L16     35 SEA FILE=CAPLUS ABB=ON 1B AND ((19 OR L10 OR L11 OR L12 OR
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L19     30 L20 NOT L22
L20     => fil medl; d que 142; d que 149; d que 151; d que 154; d que 159
L21     => fil embse; d que 161; d que 170; d que 173
L22     2304 SEA FILE=MEDLINE ABB=ON GHRELIN
L23     2202 SEA FILE=MEDLINE ABB=ON PEPTIDE HORMONES/CT
L24     553 SEA FILE=MEDLINE ABB=ON WASTING SYNDROME/CT
L25     1 SEA FILE=MEDLINE ABB=ON L28 AND L30 AND L33
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L28     553 SEA FILE=MEDLINE ABB=ON WASTING SYNDROME/CT
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L31     2202 SEA FILE=MEDLINE ABB=ON PEPTIDE HORMONES/CT
L32     8287 SEA FILE=MEDLINE ABB=ON EATING/CT(L) DE/CT
L33     4131 SEA FILE=MEDLINE ABB=ON APPETITE/CT
L34     526 SEA FILE=MEDLINE ABB=ON L30(L) (AD OR PD OR TU OR PK) /CT
L35     351 SEA FILE=MEDLINE ABB=ON L39/MAJ
L36     318 SEA FILE=MEDLINE ABB=ON L44 AND L28
L37     748346 SEA FILE=MEDLINE ABB=ON NEOPLAS+NT/CT(L) TH /CT
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L51     7250/4 SEA FILE=MEDLINE ABB=ON ANALOG? OR SECRETAGOG? OR DERIVATI?
L52     6 SEA FILE=MEDLINE ABB=ON L28 (1A) 152 AND L30 AND (L32 OR L33 OR
L53     L35 OR L36)
L54     => s 142,149,151,154,159 not 143
L55     21 (L42 OR L49 OR L51 OR L54 OR L59) NOT L43
L56     => fil embse; d que 161; d que 170; d que 173
L57     FILE 'EMBASE' ENTERED AT 14:52:09 ON 20 SEP 2007
L58     Copyright (c) 2007 Elsevier B.V. All rights reserved.
L59     FILE COVERS 1974 TO 20 Sep 2007 (20070920/ED)
L60     EMBASE is now updated daily. SDI frequency remains weekly (default)
and biweekly.
L61     This file contains CAS Registry Numbers for easy and accurate
substance identification.
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L63     2202 SEA FILE=MEDLINE ABB=ON PEPTIDE HORMONES/CT
L64     2754 SEA FILE=MEDLINE ABB=ON CACHEXIA/CT
L65     526 SEA FILE=MEDLINE ABB=ON L30 (L) (AD OR PD OR TU OR PK) /CT
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10/567406

10/567406

L61 7 SEA FILE=EMBASE ABB=ON GHRELIN DERIVATIVE/CT  
L60 2434 SEA FILE=EMBASE ABB=ON GHRELIN/CT  
L66 14 SEA FILE=EMBASE ABB=ON CANCER CACHEXIA/CT OR CANCER CACHEXIA  
SYNDROME/CT  
L70 3 SEA FILE=EMBASE ABB=ON L66 AND L60  
  
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L98 7 185 NOT L88  
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PROCESSING COMPLETED FOR L98  
L97 17 {L61 OR L70 OR L73} NOT L65  
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FOR DETAILS OF THE PATENTS COVERED IN CURRENT UPDATES, SEE  
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>> FOR DETAILS ON THE NEW AND ENHANCED DERWENT WORLD PATENTS INDEX  
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[>> http://www.stn-international.de/stdatabases/details/dwpi\\_r.html <<](http://www.stn-international.de/stdatabases/details/dwpi_r.html)  
'BI\_ABEX' IS DEFAULT SEARCH FIELD FOR 'WPIX' FILE  
L79 3107 SEA FILE=WPIX ABB=ON CACHEXIA/BI,ABEX OR CACHECTIC?/BI,ABEX  
L80 570 SEA FILE=WPIX ABB=ON B1-E11B/NC OR C14-E11B/NC  
L81 212 SEA FILE=WPIX ABB=ON GHRELIN/BI,ABEX  
L82 542701 SEA FILE=WPIX ABB=ON ANALOG?/BI,ABEX OR SECRETAGOG?/BI,ABEX  
OR DERIVATI?/BI,ABEX  
L84 23 SEA FILE=WPIX ABB=ON L81(1A)L82  
L85 10 SEA FILE=WPIX ABB=ON L84 AND (L79 OR L80)

29

30

10/567406

200707 Entered STN: 18 May 2007

Last Updated on STN: 25 Jul 2007

Entered Medline: 24 Jul 2007

**ABSTRACT:**

Cancer cachexia is a debilitating syndrome of anorexia and loss of lean body mass that accompanies many malignancies. Ghrelin is an orexigenic hormone with short half-life that has been shown to improve food intake and weight gain in human and animal subjects with cancer cachexia. We used a rat model of cancer cachexia and administered human ghrelin and a synthetic ghrelin analog BIM-28131 via continuous infusion using sc osmotic minipumps. Tumor-implanted rats receiving human \*\*\*ghrelin\*\*\* or BIM-28131 exhibited a significant increase in food consumption and weight gain vs. saline-treated animals. We used dual-energy x-ray absorptiometry scans to show that the increased weight was due to maintenance of lean mass vs. a loss of lean mass in saline-treated animals. Also, BIM-28131 significantly limited the loss of fat mass normally observed in tumor-implanted rats. We further performed real-time PCR analysis of the hypothalamus and brainstem and found that ghrelin-treated animals exhibited a significant increase in expression of orexigenic peptides agouti-related peptide and neuropeptide Y in the hypothalamus and a significant decrease in the expression of IL-1 receptor-I transcript in the hypothalamus and brainstem. We conclude that ghrelin and a synthetic \*\*\*ghrelin\*\*\* receptor agonist improve weight gain and lean body mass retention via effects involving orexigenic neuropeptides and antiinflammatory changes.

**CONTROLLED TERM:**

Check Tags: Male

Animals

\*Body Composition: DE, drug effects

Body Weight: DE, drug effects

\*Cachexia: ER, etiology

\*Cachexia: PA, pathology

Disease Models, Animal

\*Eating: DE, drug effects

Gene Expression Regulation, Neoplastic: DE, drug effects

Growth Hormone: ME, metabolism

Hypothalamus: DE, drug effects

Hypothalamus: ME, metabolism

Insulin-Like Growth Factor I: ME, metabolism

\*Neoplasms: CO, complications

Neoplasms: PR, pathology

\*Peptide Hormones: PD, pharmacology

Rats

Tumor, Inbred F344

Tumor Burden: DE, drug effects

67763-96-6 (Insulin-Like Growth Factor I): 9002-72-6

(Growth Hormone)

0 (Ghrelin)

DUPLICATE 2

CHEMICAL NAME:

L99 ANSWER 3 OF 66

MEDLINE on STN

DUPLICATE 4

MEDLINE Full-text

CAS REGISTRY NO. : 67763-96-6

(Insulin-Like Growth Factor I)

DOCUMENT NUMBER: 200730573

MEDLINE Full-text

DUPLICATE 2

CHEMICAL NAME:

L99 ANSWER 2 OF 66

MEDLINE on STN

DUPLICATE 2

DOCUMENT NUMBER: 17414495

PubMed ID:

TITLE: Emerging results of anticatabolic therapy with

Ghrelin.

AUTHOR: Akamizu Takashi; Kangawa Kenji

CORPORATE SOURCE: Ghrelin Research Project, Department of Experimental Therapeutics, Translational Research Center, Kyoto University Hospital, 54 Shogoin-Kawahara-cho, Sakyo-ku, Kyoto 606-8507, Japan.. akamizukump.kyoto-u.ac.jp

SOURCE: Current opinion in clinical nutrition and metabolic care, 31

10/567406

(2007 May) Vol. 10, No. 3, pp. 278-83. Ref: 58

Journal code: 9801399 ISSN: 1365-1950.

England: United Kingdom

Journal: Article; (JOURNAL ARTICLE)

(RESEARCH SUPPORT, NON-U.S. GOV'T)

General Review; (REVIEW)

English

Priority Journals

200706

Entered STN: 25 May 2007

Last Updated on STN: 26 Jun 2007

Entered Medline: 25 Jun 2007

**ABSTRACT:**

PURPOSE OF REVIEW: This review summarizes recent developments in research into anticatabolic therapies with ghrelin. Potential treatments in which \*\*\*ghrelin\*\*\* treatment may be useful include cachexia, anorexia and ageing. We highlight a number of intriguing basic topics related to the anticatabolic effects of ghrelin. RECENT FINDING: Repeated administration of \*\*\*ghrelin\*\*\* to patients with congestive heart failure or chronic obstructive pulmonary disease improved appetite, body composition, muscle wasting and functional capacity in open-label pilot studies. An acute, randomized, placebo-controlled, crossover clinical trial of cancer patients with anorexia revealed marked increases in energy intake following treatment. The effects of ghrelin treatment in patients with anorexia nervosa are controversial. Basic research studies have extended our understanding of the upstream regulation of neuropeptide Y/agouti-related protein signalling and the central control of adipocyte metabolism. In addition, alterations in a fat-free mass may play a role in ghrelin regulation. SUMMARY: A number of studies are currently evaluating the anticatabolic effects of \*\*\*ghrelin\*\*\* in the treatment of various diseases, including cachexia, anorexia and age-related disorders. These studies will hopefully lead to the development of novel clinical applications for ghrelin treatment. These studies have also facilitated a better understanding of the molecular basis of the anticatabolic effects of ghrelin.

**CONTROLLED TERM:**

Aging

\*Anorexia: DT, drug therapy

Appetite: DE, drug effects

\*Cachexia: DT, drug therapy

Data Collection

\*Energy Intake: DE, drug effects

\*Energy Metabolism: DE, drug effects

Humans

\*Peptide Hormones: TU, therapeutic use

Chemical Name:

0 (Peptide Hormones): 0 (ghrelin)

L99 ANSWER 3 OF 66 MEDLINE on STN DUPLICATE 4

MEDLINE Full-text

PubMed ID: 16508225

TITLE: Ghrelin, a novel growth hormone-releasing peptide, in the treatment of cardiopulmonary-associated cachexia.

Nagaya Moritoshi; Kojima Masakazu; Kangawa Kenji

Department of Regenerative Medicine and Tissue Engineering,

National Cardiovascular Center Research Institute, Osaka,

Internal medicine (Tokyo, Japan), (2006) Vol. 45, No. 3,

pp. 127-34. Electronic Publication: 2006-03-01. Ref: 83

Journal code: 9204241. E-ISSN: 1349-7235.

Comment in: Intern Med. 2006;45(13):837. PubMed ID:

16880/13. Japan

32

## DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

English

Priority Journals

200608

Entered STN: 2 Mar 2006

Last Updated on STN: 23 Aug 2006

Entered Medline: 22 Aug 2006

## ABSTRACT:

Ghrelin is a novel growth hormone (GH)-releasing peptide, isolated from the stomach, which has been identified as an endogenous ligand for GH secretagogue receptor. The discovery of ghrelin indicates that the release of GH from the pituitary might be regulated not only by hypothalamic GH-releasing hormone, but also by ghrelin derived from the stomach. This peptide also stimulates food intake and induces adiposity through GH-independent mechanisms. In addition, ghrelin acts directly on the central nervous system to decrease sympathetic nerve activity. Thus, \*\*\*ghrelin\*\*\* plays important roles for maintaining GH release and energy homeostasis. Repeated administration of ghrelin improves body composition, muscle wasting, functional capacity, and sympathetic augmentation in cachectic patients with heart failure or chronic obstructive pulmonary disease. These results suggest that ghrelin has anti-cachectic effects through GH-dependent and independent mechanisms. Thus, administration of ghrelin may be a new therapeutic strategy for the treatment of cardiopulmonary-associated cachexia.

## Animals:

\*Cachexia: DT, drug therapy

Growth Hormone: TU, therapeutic use

Heart Failure, Congestive: CO, complications

Heart Failure, Congestive: PP, physiopathology

## Humans

Peptide Hormones: PD, pharmacology

Peptide Hormones: PH, physiology

\*Peptide Hormones: TU, therapeutic use

\*Pulmonary Disease, Chronic Obstructive: CO, complications

Pulmonary Disease, Chronic Obstructive: PP, physiopathology

Stomach: ME, metabolism

9002-72-6 (Growth Hormone)

0 (Peptide Hormones); 0 (ghrelin)

MEDLINE on STN

DUPLICATE 5

\*Peptide Hormones: PD, pharmacology

\*Peptide Hormones: TU, therapeutic use

COMMENT: Treatment of cachexia with ghrelin in patients with COPD.

Nagaya Noritoshi; Itoh Takefumi; Murakami Shinsuke; Oya Hideo; Uematsu Masashi; Miyatake Kuni; Kangawa Kenji

Department of Internal Medicine, National Cardiovascular Center, 5-7-1 Fujishirodai, Suita, Osaka 565-8565, Japan..

nnagaya@ri.ncvc.go.jp

Journal, (2005 Sep) Vol. 128, No. 3, pp. 1187-93.

SOURCE: CHEST

DOCUMENT NUMBER: 2005491621 MEDLINE Full-text

DUPLICATE 5

COMMENT: Treatment of cachexia with ghrelin in patients with COPD.

Nagaya Noritoshi; Itoh Takefumi; Murakami Shinsuke; Oya Hideo; Uematsu Masashi; Miyatake Kuni; Kangawa Kenji

Department of Internal Medicine, National Cardiovascular Center, 5-7-1 Fujishirodai, Suita, Osaka 565-8565, Japan..

nnagaya@ri.ncvc.go.jp

Journal, (2005 Sep) Vol. 128, No. 3, pp. 1187-93.

SOURCE: CHEST

DOCUMENT NUMBER: 16162686 PubMed ID: 16162686

DUPLICATE 5

COMMENT: Ghrelin improves left ventricular dysfunction and

cardiac cachexia in heart failure.

Nagaya Noritoshi; Kangawa Kenji

Department of Internal Medicine, National Cardiovascular Center, 5-7-1 Fujishirodai, Suita, Osaka, 565-8565, Japan..

## FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

200511

Entered STN: 16 Sep 2005

Last Updated on STN: 9 Nov 2005

Entered Medline: 8 Nov 2005

## ABSTRACT:

**STUDY OBJECTIVES:** Ghrelin is a novel growth hormone (GH)-releasing peptide that also induces a positive energy balance by decreasing fat utilization and stimulating feeding through GH-independent mechanisms. We investigated whether ghrelin improves cachexia and functional capacity in patients with COPD. **METHODS:** This is an open-label pilot study. Human ghrelin (2 microg/kg bid) was IV administered to seven cachectic patients with COPD for 3 weeks. Food intake, body composition, muscle strength, exercise capacity, pulmonary function, and sympathetic nerve activity were examined before and after ghrelin therapy. **RESULTS:** A single administration of \*\*ghrelin\*\* markedly increased serum GH (21-fold). Three-week treatment with ghrelin resulted in a significant increase in mean (+/- SEM) body weight (49.3 +/- 3.6 to 50.3 +/- 3.8 kg; p < 0.05). Food intake was significantly increased during ghrelin therapy. Ghrelin increased lean body mass and peripheral respiratory muscle strength. \*\*\*Ghrelin\*\*\* significantly increased Karnofsky performance status score and the distance walked in 6 min (370 +/- 30 to 432 +/- 35 m; p < 0.05), although it did not significantly alter pulmonary function. Ghrelin attenuated the exaggerated sympathetic nerve activity, as indicated by a marked decrease in plasma norepinephrine level (889 +/- 123 to 597 +/- 116 pg/ml; p < 0.05). **CONCLUSIONS:** These preliminary results suggest that repeated administration of ghrelin improves body composition, muscle wasting, functional capacity, and sympathetic augmentation in cachectic patients with COPD.

## CONTROLLED TERM:

Check Tags: Female; Male

Aged, 80 and over

Body Composition: DE, drug effects

\*Cachexia: DT, drug therapy

Cachexia: ET, etiology

Exercise Tolerance: DE, drug effects

\*Growth Hormone-Releasing Hormone: PD, pharmacology

Growth Hormone-Releasing Hormone: TU, therapeutic use

Humans

Muscle Weakness: DT, drug therapy

Muscular Atrophy: DT, drug therapy

Peptide Hormones: PD, pharmacology

Peptide Hormones: TU, therapeutic use

Pilot Projects

\*Pulmonary Disease, Chronic Obstructive: CO, complications

Respiratory Function: DE, drug effects

Respiratory System: DE, drug effects

Sympathetic Nervous System: DE, drug effects

9034-39-3 (Growth Hormone-Releasing Hormone)

0 (Peptide Hormones); 0 (ghrelin)

CAS REGISTRY NO.: 199 ANSWER 5 OF 66

MEDLINE on STN

DUPLICATE 5

MEDLINE on STN

DUPLICATE 9

MEDLINE Full-text

200516475

Pubmed ID: 12681236

COMMENT: Ghrelin improves left ventricular dysfunction and

cardiac cachexia in heart failure.

Nagaya Noritoshi; Kangawa Kenji

Department of Internal Medicine, National Cardiovascular Center, 5-7-1 Fujishirodai, Suita, Osaka, 565-8565, Japan..

nagayann@hsp.hvc.go.jp

Current opinion in pharmacology. (2003 Apr) Vol. 3, No. 2, ;

pp. 146-51. Ref: 55. ISSN: 1471-4892.

Journal code: 10036633. ISBN: 1471-4892.

England; United Kingdom (RESEARCH SUPPORT, NON-U.S. GOVT)

General Review; (REVIEW)

English

Priority Journals

200308

Entered STN: 9 Apr 2003

Last Updated on STN: 28 Aug 2003

Entered Medline: 27 Aug 2003

**ABSTRACT:**

Ghelin is a novel growth-hormone-releasing peptide isolated from the stomach that has been identified as an endogenous ligand for the growth-hormone secreting receptor. This peptide results in a positive energy balance by stimulating food intake and inducing adiposity through growth-hormone-independent mechanisms. In addition, ghelin has several cardiovascular effects, as indicated by the presence of its receptor in blood vessels and ventricles of the heart. Infusion of ghelin decreases systemic vascular resistance and increases cardiac output in patients with heart failure. Furthermore, repeated administration of ghelin improves cardiac structure and function, and attenuates the development of cardiac cachexia in rats with heart failure. These results suggest that \*\*\*ghelin\*\*\* has therapeutic potential in the treatment of severe chronic heart failure.

**CONTROLLED TERM:**

Animals

Cachexia: BL, blood

\*Cachexia: DT, drug therapy

Heart Failure, Congestive: BL, blood

\*Heart Failure, Congestive: DT, drug therapy

Humans

Peptide Hormones: Bb, blood

Peptide Hormones: SE, secretion

\*Peptide Hormones: TU, therapeutic use

Ventricular Dysfunction, Left: BL, blood

\*Ventricular Dysfunction, Left: DT, drug therapy

0 (Peptide Hormones): 0 (ghrelin)

**ABSTRACT:**  
 Body weight loss is common in cancer patients, and is often associated with poor prognosis; it greatly impairs quality of life (QOL). Radiation therapy (RT) is used in head and neck cancers (HNC) either as a primary treatment or as an adjuvant therapy to surgery. Patients with HNC are most susceptible to malnutrition especially due to anorexia, which is aggravated by RT. Multiple pro-inflammatory cytokines, such as interleukin-6 (IL-6), interleukin-1beta (IL-1beta), interferon (IFN)-gamma and tumor necrosis factor-alpha/TNF-alpha, have been all associated with the development of both anorexia and oral mucositis. Radiation-induced mucositis occurs in almost all patients, who are treated for HNC, it could also cause weight loss. Ghrelin is a novel 28-amino acid peptide, which up regulates body weight through appetite control, increase food intake, down-regulate energy expenditure and induces adiposity. Furthermore, ghrelin inhibits pro-inflammatory cytokines such as IL-lalpha, IL-lbeta, TNF-lbeta which may cause oral mucositis and anoxia, which are the results of weight loss. Thus weight loss during RT is an early indicator of nutritional decline; we propose that recombinant ghrelin used prophylactically could be useful as an appetite stimulant; and preventive of mucositis because of its anti-inflammatory effect, it might help patients maintain weight over the course of curative RT of the HNC and can improve specific aspects of QOL. This issue warrants further studies.

**CONTROLLED TERM:**

Anorexia: PC, prevention &amp; control

Appetite

Anorexia: RI, radionuclide imaging

Head and Neck Neoplasms: PP, physiopathology

Head and Neck Neoplasms: RT, radiotherapy

Humans

\*Mucositis: DT, drug therapy

\*Mucositis: RI, radionuclide imaging

\*Peptide Hormones: TU, therapeutic use

\*Radiotherapy: AE, adverse effects

0 (Peptide Hormones): 0 (ghrelin)

**CHEMICAL NAME:**  
 L99 ANSWER 7 OF 66 MEDLINE on STN  
**ACCESSION NUMBER:** 2007011711 MEDLINE Full-text  
**DOCUMENT NUMBER:** PubMed ID: 17030099  
**TITLE:** Ghrelin may reduce radiation-induced mucositis and anorexia in head/neck cancer. Guney Yildiz: Ozel Turku Ummuhan; Hicsonmez Ayse; Nalca Andieu Meltem; Kurman Cengiz Department of Radiation Oncology, Ankara University School of Medicine, Cebeci Hospital, Dikimevi, Ankara 06390, Turkey.. yildiz\_guney@yahoo.com  
**SOURCE:** Medical hypotheses. (2007) Vol. 68, No. 3, pp. 538-40.  
 Electronic Publication: 2006-10-09. Journal code: 7503668. ISSN: 036-9877.

**CORPORATE SOURCE:** Scorland; United Kingdom (JOURNAL ARTICLE)  
**LANGUAGE:** English  
**FILE SEGMENT:** Priority Journals  
**ENTRY MONTH:** 200704  
**ENTRY DATE:** Entered STN: 9 Jan 2007  
**CONTROLLED TERM:**  
 \*Cachexia: DT, drug therapy  
 Cachexia: ET, etiology  
 Heart Failure, Congestive: CO, complications

Humans	* Peptide Hormones: TU, therapeutic use Pulmonary Disease, Chronic Obstructive: CO, complications 0 (Peptide Hormones); 0 (ghrelin)
CHEMICAL NAME:	99 ANSWER 8 OF 66 MEDLINE on STN
ACCESSION NUMBER:	2006260324 MEDLINE Full-text
DOCUMENT NUMBER:	PubMed ID: 16685441
ITLE:	Effects of ghrelin on anorexia in tumor-bearing mice with eicosanoid-related cachexia.
AUTHOR:	Wang Wenbiao; Andersson Marianne; Iresjo Britt-Marie; Lonnroth Christina; Lundholm Kent
CORPORATE SOURCE:	Surgical Metabolic Research Laboratory at Lundberg Laboratory for Cancer Research, Department of Surgery, Sahlgrenska University Hospital, Goteborg University, Goteborg, Sweden.
SOURCE:	International journal of oncology, (2006 Jun) Vol. 28, No. 6, pp. 1393-1400. Journal code: 9306042. ISSN: 1019-6439.
SUB, COUNTRY:	Greece
DOCUMENT TYPE:	Journal Article; (JOURNAL ARTICLE) (RESEARCH SUPPORT, NON-U.S. GOV'T)
LANGUAGE:	English
TITLE SEGMENT:	Priority Journals
INTRY MONTH:	Entered STN: 11 May 2006
INTRY DATE:	Last Updated on STN: 17 Aug 2006 Entered Medline: 16 Aug 2006
ABSTRACT:	Ghrelin is a novel brain-gut peptide that stimulates food intake and may secondarily increase body weight via a growth hormone secretagogue receptor (GHS-R). Tumor-bearing mice (MCG101), characterized by anorexia, fat loss and muscle wasting due to increased concentration of PGE2 and proinflammatory cytokines (IL-1beta, IL-6, TNF-alpha), were provided ghrelin i.p. at low (20 microg/day) and high dose (40 microg/day) to examine the ability of ghrelin** to counteract tumor-induced anorexia. Immunohistochemical staining and Western blot analyses were used to identify GHS-R expression in the brain as well as its relationship to NPY expression in hypothalamic neurons. GHS-R mRNA in hypothalamus and ghrelin mRNA in gastric fundus were quantified by RT-PCR. Body composition was determined by carcass extinctions, GHS-R expression in hypothalamus and plasma ghrelin levels were significantly increased in freely-fed tumor-bearing mice, while gastric fundus expression of ghrelin was unaltered compared to non-tumor-bearing mice (controls). Ghrelin treatment increased food intake, body weight and whole body fat at both low and high doses of exogenous ghrelin** in normal controls, while tumor-bearing mice showed improved anorexia and body composition at the high dose of ghrelin only. Exogenous ghrelin normalized the GHS-R expression in hypothalamus from tumor-bearing mice without alterations in the gastric fundus expression of ghrelin.** Tumor growth was not altered by exogenous ghrelin. Our results indicate that MCG 101-bearing mice became ghrelin resistant despite upregulation of hypothalamic GHS-R expression, which confirm similar indirect observations in cancer patients. Thus, other factors downstream of the ghrelin-GHS-R system appear to be more important than ghrelin to explain cancer-induced anorexia.
ONTROLLED TERM:	Animals *Anorexia: DT, drug therapy Anorexia: EF, etiology *Anorexia: DT, drug therapy *Anorexia: EF, etiology *Anorexia: DT, drug therapy

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Cachexia: ET, etiology	
Eicosanoids: AE, adverse effects	
Energy Intake:	
Growth Hormone: TU, therapeutic use	
Mice	
Mice, Inbred C57BL	
* Peptide Hormones: TU, therapeutic use	
RNA, Messenger: GE, genetics	
Receptors, G-Protein-Coupled: GE, genetics	
Reverse Transcriptase Polymerase Chain Reaction	
Sarcoma, Experimental: CO, complications	
* Sarcoma, Experimental: PA, pathology	
9002-72-6 (Growth Hormone)	
0 (Eicosanoids); 0 (Peptide Hormones); 0 (RNA, Messenger); 0 (Receptors, G-Protein-Coupled); 0 (ghrelin); 0 (growth hormone secretagogue receptor)	
	MEDLINE on STN
L 99 ANSWER 9 OF 66	200638415 MEDLINE Full-text
ACCESSION NUMBER:	PubMed ID: 1687986
DOCUMENT NUMBER:	
TITLE:	Translational research on the clinical applications of ghrelin.
AUTHOR:	Akamizu Takashi; Kangawa Kenji
CORPORATE SOURCE:	Ghrelin Research Project, Department of Experimental Therapeutics, Translational Research Center, Kyoto University Hospital, Kyoto University School of Medicine, Kyoto, Japan.
SOURCE:	Endocrine journal, (2006 Oct) Vol. 53, No. 5, pp. 585-91. Electronic Publication: 2006-07-28. Ref: 52
PUB. COUNTRY:	Japan
DOCUMENT TYPE:	Journal Article (JOURNAL ARTICLE) (RESEARCH SUPPORT, NON-U.S. GOV'T)
LANGUAGE:	General Review; (REVIEW) English
FILE SEGMENT:	Priority Journals
ENTRY MONTH:	200704
ENTRY DATE:	Entered STN: 1 Nov 2006
CONTROLLED TERM:	Last Updated on STN: 3 Apr 2007 Entered Medline: 2 Apr 2007
CHEMICAL NAME:	Anorexia Nervosa: DT, drug therapy Cachexia: DT, drug therapy Clinical Trials, Phase I Clinical Trials, Phase II Dwarfism, Pituitary: DT, drug therapy Eating Disorders: DT, drug therapy Humans Models, Biological Peptide Hormones: PH, physiology Peptide Hormones: TU, therapeutic use
CHEMICAL NAME:	0 (Peptide Hormones); 0 (ghrelin)
L 99 ANSWER 10 OF 66	MEDLINE on STN
ACCESSION NUMBER:	2006151684 MEDLINE Full-text
DOCUMENT NUMBER:	PubMed ID: 16541004
TITLE:	Role of ghrelin in the regulation of appetite in children.
AUTHOR:	Savastio S; Bellone S; Baldelli R; Ferraris M; Lapidari A; Zanetti F; Sogni S; Petri A; Bona G
CORPORATE SOURCE:	Division of Pediatric Endocrinology, Department of Medical Sciences

University of Piemonte Orientale, A. Avogadro, Novara, Italy.  
Minerva Pediatrica, (2006 Feb) Vol. 58, No. 1, pp. 21-6.

Ref: 47  
Journal code: 0400740. ISSN: 0026-4946.

Italy  
Journal; Article; (JOURNAL ARTICLE)  
General Review; (REVIEW)

English  
Priority Journals  
200608  
Entered STN: 17 Mar 2006  
Last Updated on STN: 2 Aug 2006  
Entered Medline: 1 Aug 2006

**ABSTRACT:**  
Ghrelin, the new recently discovered hormone, is a 28 amino-acid acylated peptide predominantly produced by the stomach characterized by a strong GH-releasing activity mediated by the hypothalamic-pituitary GH secretagogues (GHSs) receptors. Ghrelin and GHSs, acting on central and peripheral receptors, exert other actions such as stimulation of ACTH and prolactin secretion, influence on insulin secretion and glucose metabolism, orexigenic effect and modulatory activity on the neuroendocrine and metabolic response to starvation, influence on exocrine gastro-entero-pancreatic functions, cardiovascular activities and modulation of cell proliferation and apoptosis. The wide spectrum of ghrelin action requires further studies to provide critical information on the role of ghrelin and the potential perspectives of its analogies in the clinical practice. This point is of particular interest in the field of pediatric endocrinology and metabolism because the ghrelin story started focusing on GH deficiency and is now extending to aspects that once again are of major relevance such as obesity and eating disorders, regulation of the hypothalamus-pituitary-adrenal and gonadal axis. More studies are needed to evaluate the real impact of ghrelin in different non endocrine processes and the possible use of ghrelin analogues in different diseases condition.

**CONTROLLED TERM:**

\*Appetite: DE, drug effects

Child  
Eating Disorders: DT, drug therapy

Eating Disorders: ME, metabolism

Human Growth Hormone: PD, pharmacology  
Human Growth Hormone: TU, therapeutic use  
Humans

\*Peptide Hormones: PD, pharmacology  
\*Treatment Outcome  
\*Peptide Hormones: TU, therapeutic use

12629-01-5 (Human Growth Hormone)  
0 (Peptide Hormones); 0 (ghrelin)

L99 ANSWER 11 OF 66 MEDLINE on STN  
ACCESSION NUMBER: 2005651221 MEDLINE Full-text  
DOCUMENT NUMBER: PubMED ID: 1633213  
TITLE: Cachexia in chronic heart failure: prognostic implications and novel therapeutic approaches.  
AUTHOR: Akashi Yoshihiro; Springer Jochen; Anker Stefan D  
CORPORATE SOURCE: Division of Applied Cachexia Research, Department of Cardiology, Charite Campus Virchow-Klinikum, Augustenburger Platz 1, 13353 Berlin, Germany.  
SOURCE: Current heart failure reports, (2005 Dec) Vol. 2, No. 4, pp. 198-203. Ref: 58  
Journal code: 10119687. ISSN: 1546-9530.

PUB. COUNTRY: United States  
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 200602  
ENTRY DATE: Entered STN: 16 Dec 2005  
Last Updated on STN: 28 Feb 2006  
Entered Medline: 23 Feb 2006

**ABSTRACT:**

Cachexia in patients with chronic heart failure (CHF) has been recognized for a long time; however, it has not received much attention until recently. Cardiac cachexia, a common and serious complication of CHF, is associated with very poor prognosis. Several studies have demonstrated that increased neurohormonal and immune abnormalities may play a crucial role in the pathophysiology of cardiac cachexia. Hormonal and catabolic/anabolic imbalances of the body are likely to be responsible for the development of cachexia in CHF. Recently, \*\*\*ghrelin\*\*\*, a novel growth hormone-releasing peptide, has been widely noticed to have potential in the treatment of severe CHF and cardiac cachexia. However, further research will be necessary to identify the exact pathways involved and to find the best therapeutic strategies of using ghrelin to fight the wasting process.

**CONTROLLED TERM:**

Cachexia: DT, drug therapy

\*Cachexia: ET, etiology

Cachexia: ME, metabolism

Disease Progression

\*Growth Hormone: ME, metabolism

\*Heart Failure, Congestive: CO, complications

Humans

\*Peptide Hormones: TU, therapeutic use

Prognosis

900-72-6 (Growth Hormone)

0 (Peptide Hormones); 0 (ghrelin)

CAS REGISTRY NO.: L99 ANSWER 12 OF 66 MEDLINE on STN  
CHEMICAL NAME: ACCESSION NUMBER: 200726316 MEDLINE Full-text  
DOCUMENT NUMBER: PubMED ID: 17471875  
TITLE: [Secondary anorexia: physiology and treatment].  
Anorexia secundaria: fisiologia y tratamiento.  
AUTHOR: Milke Garcia Maria del Pilar  
CORPORATE SOURCE: Coordinadora de Investigacion y Servicio Social en Nutricion.  
SOURCE: Revista de gastroenterologia de Mexico, (2005 Nov) Vol. 1, 70 Suppl. 3, pp. 94-5. Ref: 8  
Journal code: 0404271. ISSN: 0375-0906.  
Mexico  
PUB. COUNTRY: Mexico  
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: Spanish  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 200705  
ENTRY DATE: Entered STN: 3 May 2007  
Last Updated on STN: 15 May 2007  
Entered Medline: 14 May 2007  
**CONTROLLED TERM:**  
Anorexia: DT, drug therapy  
\*Anorexia: ET, etiology  
Anorexia: PP, physiopathology  
\*Anorexia: TH, therapy  
Anti-Inflammatory Agents: TU, therapeutic use  
Cachexia: CO, complications

**CHEMICAL NAME:** O (Anti-Inflammatory Agents); O (Peptide Hormones); O (Steroids); O (Ghrelin)

**DOCUMENT NUMBER:** L99 ANSWER 13 OF 66

**ACCESSION NUMBER:** 2004621114

**DOCUMENT ID:** 15569841

**Full-text:** MEDLINE on STN

**TITLE:** Effects of ghrelin administration on left ventricular function, exercise capacity, and muscle wasting in patients with chronic heart failure.

**AUTHOR:** Nagaya Noritoshi; Moriya Junji; Yasumura Yoshiro; Uematsu Masaaki; Ono Fumiaki; Shimizu Wataru; Ueno Karuyuki; Kitakaze Masafumi; Miyatake Kunio; Kangawa Kenji

**CORPORATE SOURCE:** Department of Internal Medicine, National Cardiovascular Center, 5-7-1 Fujishirodai, Suita, Osaka 565-0565, Japan.. nayayan@nccv.go.jp

**SOURCE:** Circulation, (2004 Dec 14) Vol. 110, No. 24, pp. 3674-9.

**Electronic Publication:** 2004-11-29.

**Journal code:** 047763. E-ISSN: 1524-4539.

**PUB. COUNTRY:** United States

**DOCUMENT TYPE:** (CLINICAL TRIAL) Journal; Article; (JOURNAL ARTICLE) (RESEARCH SUPPORT, NON-U.S. GOV'T)

**LANGUAGE:** English

**FILE SEGMENT:** Abridged Index Medicus Journals; Priority Journals

**ENTRY MONTH:** 200505

**ENTRY DATE:** Entered 20 Dec 2004  
Last Updated on STN: 26 May 2005  
Entered Medline: 25 May 2005

**ABSTRACT:** BACKGROUND: Ghrelin is a novel growth hormone-releasing peptide that also induces vasodilation, inhibits sympathetic nerve activity, and stimulates feeding through growth hormone-independent mechanisms. We investigated the effects of ghrelin on left ventricular (LV) function, exercise capacity, and muscle wasting in patients with chronic heart failure (CHF). METHODS AND RESULTS: Human synthetic ghrelin (2 microg/kg twice a day) was intravenously administered to 10 patients with CHF for 3 weeks. Echocardiography, cardiopulmonary exercise testing, dual x-ray absorptiometry, and blood sampling were performed before and after ghrelin therapy. A single administration of ghrelin elicited a marked increase in serum GH (25-fold). Three-week administration of ghrelin resulted in a significant decrease in plasma norepinephrine (1122+/-188 to 655+/-134 pg/mL; P<0.001). Ghrelin increased LV ejection fraction (27+/-28 to 31+/-2%; P<0.05) in association with an increase in LV mass and a decrease in LV end-systolic volume. Treatment with ghrelin increased peak workload and peak oxygen consumption during exercise. Ghrelin improved muscle wasting, as indicated by increases in muscle strength and lean body mass. These parameters remained unchanged in 8 patients with CHF who did not receive ghrelin therapy. CONCLUSIONS: These preliminary results suggest that repeated administration of ghrelin improves LV function, exercise capacity, and muscle wasting in patients with CHF.

**CONTROLLED TERM:** Aged, 80 and over  
Body Weight: DE, drug effects  
\*Cachexia: DT, drug therapy

**Cachexia:** ET, etiology  
**Cachexia:** PP, physiopathology  
**Chronic Disease**  
**Eating, DE, drug effects**  
**\*Exercise**  
**Heart Failure, Congestive:** CO, complications  
**Heart Failure, Congestive:** DR, drug therapy  
**Hemodynamic Processes**  
**Human Growth Hormone:** BL, blood  
**Humans**  
**Infusions, Intravenous**  
**Middle Aged**  
**Oxygen Consumption:** DE, drug effects  
**Peptide Hormones:** AD, administration & dosage  
**Peptide Hormones:** AE, adverse effects  
**\*Peptide Hormones:** TU, therapeutic use  
**Pulmonary Ventilation:** DE, drug effects  
**Sympathetic Nervous System:** DE, drug effects  
**Sympathetic Nervous System:** PP, physiopathology  
**Ventricular Function:** Left: DE, drug effects  
**12629-01-5 (Human Growth Hormone)**  
**O (Peptide Hormones): O (Ghrelin)**

**L99 ANSWER 14 OF 66**

**MEDLINE ON STN**

**ACCESSION NUMBER:** 20059927

**DOCUMENT NUMBER:** MEDLINE Full-text

**PUBLISHED ID:** 15572207

**TITLE:** Regulation of ghrelin gene expression in stomach and feeding response to a ghrelin analogue in two strains of rats.

**AUTHOR:** Liu Xiaotuan; York David A; Bray George A

**CORPORATE SOURCE:** Experimental Obesity Laboratory, Pennington Biomedical Research Center, 6400 Perkins Road, Baton Rouge, LA 70808, USA.. lux@pbrc.edu

**SOURCE:** Peptides, (2004 Dec) Vol. 25, No. 12, pp. 2171-7.

**PUB. COUNTRY:** United States

**DOCUMENT TYPE:** Journal; Article; (JOURNAL ARTICLE) (RESEARCH SUPPORT, NON-U.S. GOV'T)

**LANGUAGE:** English

**FILE SEGMENT:** Priority Journals

**ENTRY MONTH:** 200506

**ENTRY DATE:** Entered STN: 2 Dec 2004  
Last Updated on STN: 8 Jun 2005  
Entered Medline: 7 Jun 2005

**ABSTRACT:** Ghrelin is a peptide produced by the stomach and released into the circulation. As a natural ligand of the growth hormone secretagogue (GHS) receptor, it stimulates growth hormone secretion but it also stimulates feeding in humans and rodents. The orexigenic effect of ghrelin has been related to AgRP/NPY and orexin pathways. We proposed that ghrelin might be involved in the susceptibility to diet induced obesity and in the regulation of macronutrient selection. We have investigated these hypotheses in two strains of rat, the Osborne-Mendel (OM) rat that prefers diets high in fat and is sensitive to dietary obesity and the S5B/P1 (S5B) rat that prefers a low fat diet and is resistant to high fat diet induced obesity. OM and S5B rats were adapted to a choice of high fat (HF) and low fat (LF) diet for 2 weeks. GHRP-2, an \*\*analogue\*\* of ghrelin, was injected intraperitoneally into satiated and 24 h fasted rats at doses of 10, 30 and 90 nmol. Food intake was measured over the next 4 h period. In satiated S5B rats, GHRP-2 stimulated

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intake of the LF diet in a dose dependent manner but did not affect the intake of the HF diet. In satiated OM rats, 90 nmol of GIPR-P-2 stimulated HF intake. In contrast, neither fasted OM nor SSB rats increased the intake of either HF or LF diet in response to GHR-2. Fasting for 18 h induced a large rise in ghrelin mRNA in stomach of OM rats but not in SSB rats. There were no significant differences in plasma total ghrelin. An increase in ghrelin mRNA in stomach immediately before the onset of the dark cycle was observed in OM but not in SSB rats. Active ghrelin level was significantly affected by different feeding conditions in both OM and SSB rats adapted on HF diet with a trend to increase after 48 h of fasting and to decline to basal levels following 10 h of refeeding. These data suggest that ghrelin stimulates the intake of the preferred macronutrient. In addition, a differential regulation of ghrelin gene expression between OM and SSB rats may be important in their differential sensitivity to HF diet-induced obesity.

CONTROLLED TERM: Check Tags: Male

Animals

Dietary Rats: AD, administration &amp; dosage

\*Eating

Eating: DE, drug effects

Energy Intake: DE, drug effects

Fasting: ME, metabolism

\*Gene Expression-Regulation

\*Oligopeptides: PD, pharmacology

Peptide Hormones: BI, biosynthesis

Peptide Hormones: BI, blood

\*Peptide Hormones: GE, genetics

Rats

CHEMICAL NAME: 0 (Dietary Fats); 0 (Oligopeptides); 0 (Peptide Hormones); 0 (ghrelin); 0 (growth hormone-releasing peptide-2)

L99 ANSWER 15 OF 66 MEDLINE on STN

ACCESSION NUMBER: 2004114490 MEDLINE Full-text

DOCUMENT NUMBER: 15004432 PubMed ID:

TITLE: Orxigenic actions of ghrelin in goldfish: feeding-induced

changes in brain and gut mRNA expression and serum levels, and responses to central and peripheral injections.

AUTHOR: Unniappan Suraj; Canosa Luis Fabian; Peter Richard E; Department of Biological Sciences, University of Alberta, Edmonton, Alta., Canada.

SOURCE: Neuroendocrinology, (2004 Feb) Vol. 79, No. 2, pp. 100-8. Journal code: 0033-6655. ISSN: 0028-3835.

PUB. COUNTRY: Switzerland (COMPARATIVE STUDY)

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

(RESEARCH SUPPORT, NON-U.S. GOVT)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200405

ENTRY DATE: Entered STN: 9 Mar 2004

Last Updated on STN: 18 May 2004

Entered Medline: 17 May 2004

ABSTRACT: In this study, we examined (i) the preprandial, postprandial and starvation-induced changes in the preproghrelin mRNA expression and serum

ghrelin levels, and (ii) the effects of intracerebroventricular and intraperitoneal administration of ghrelin on food intake in goldfish. Slot blot analysis revealed a significant postprandial decrease in preproghrelin mRNA expression in the hypothalamus (1 and 3 h after feeding) and gut (3 h after feeding). A similar postprandial decrease (1 and 3 h after feeding) in

serum ghrelin levels was also detected. In the fish that were unfed at the regular feeding time, the hypothalamic preproghrelin mRNA expression and the serum ghrelin levels remained unchanged, while the preproghrelin mRNA expression in the gut decreased 3 h after the regular feeding time. Starvation increased preproghrelin mRNA expression in the hypothalamus and gut on the 7th day. Serum ghrelin levels were significantly elevated on days 3 and 5 of starvation. Intracerebroventricular injections of n-octanoylated \*\*\*ghrelin\*\*\* -like peptides (gGRL(1-12)) (10 ng/g body weight) and intraperitoneal injections of n-octanoylated gGRL(11-12) (10 ng/g body weight), gGRL(11-19) (100 ng/g body weight), and human ghrelin (10 and 100 ng/g body weight) stimulated food intake in goldfish. The patterns of synthesis, secretion and actions indicate that Ghrelin is an orexigen in goldfish.

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CONTROLED TERM: Check Tags: Female; Male

Animals

\*Appetite: PH, physiology  
\*Digestive System: ME, metabolism  
Eating: PH, physiology  
\*Feeding Behavior: PH, physiology  
\*Goldfish: PH, physiology  
Growth Hormone: PH, physiology  
\*Hypothalamus: ME, metabolism  
Peptide Hormones: GE, genetics  
Peptide Hormones: ME, metabolism  
Peptide Hormones: PH, physiology  
Postprandial Period  
Protein Precursors: GE, genetics  
Protein Precursors: ME, metabolism  
RNA, Messenger: AN, analysis  
Starvation: GE, genetics  
Starvation: ME, metabolism  
9002-72-6 (Growth Hormone)  
0 (Peptide Hormones); 0 (Protein Precursors); 0 (RNA);  
Messenger; 0 (ghrelin)

L99 ANSWER 16 OF 66 MEDLINE on STN  
ACCESSION NUMBER: 2004434142 MEDLINE Full-text  
DOCUMENT NUMBER: 15339248 PubMed ID:  
TITLE: Novel analogs of ghrelin: physiological and clinical implications, Halem Haecher A, Taylor John E, Dong Jesse Z, Shen Yeeana; Datta Rakesh; Abizzar Alfonso; Bluet-Pajot Marie-Therese; Tamasi: Zizzari Philippe; Culter Michael D; Epelbaum Jacques; Culter Michael D IPSEN, 27 Maple Street, Milford, Massachusetts 01757, USA. European journal of endocrinology / European Federation of Endocrine Societies, (2004 Aug) Vol. 151 Suppl 1, pp. S71-5.  
Journal code: 9423848. ISSN: 0804-4643.  
England: United Kingdom  
Journal: Article; (JOURNAL ARTICLE)  
Language: English  
Priority Journals  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 200405  
ENTRY DATE: Entered STN: 9 Mar 2004  
Last Updated on STN: 18 May 2004  
Entered Medline: 17 May 2004  
ABSTRACT: In this study, we examined (i) the preprandial, postprandial and starvation-induced changes in the preproghrelin mRNA expression and serum ghrelin levels, and (ii) the effects of intracerebroventricular and intraperitoneal administration of ghrelin on food intake in goldfish. Slot blot analysis revealed a significant postprandial decrease in preproghrelin mRNA expression in the hypothalamus (1 and 3 h after feeding) and gut (3 h after feeding). A similar postprandial decrease (1 and 3 h after feeding) in

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for the growth hormone (GH) secretagogue (GHS) receptor, has multiple activities in addition to stimulation of GH secretion, including stimulation of feeding and weight gain. To utilize these actions for potential therapeutic benefit, we have produced analogs of human ghrelin with enhanced metabolic stability, affinity for the GHS receptor, and efficacy in stimulating weight gain. We have also discovered an analog of ghrelin, BIM-28163, that is an antagonist at the GHS receptor and that fully inhibits GHS receptor activation induced by native ghrelin. In vivo, BIM-28163 does not increase GH secretion but fully blocks ghrelin-induced GH secretion. In contrast, BIM-28163 acts as a full agonist with regard to the ghrelin actions of stimulating weight gain and food intake. These results suggest that a receptor other than the GHS receptor mediates the actions of ghrelin on feeding and weight gain. This concept is strengthened by our observation that at certain hypothalamic sites, BIM-28163 acts as an antagonist of ghrelin-induced neuronal activation, while at other sites, both ghrelin and BIM-28163 induce neuronal activation via the same receptor. Collectively, these results indicate the existence of a novel ghrelin receptor that may regulate the feeding activity of ghrelin. Using BIM-28163 as a tool to define the endogenous role of ghrelin in normal GH secretion, we have demonstrated that antagonism of the GHS receptor in normal rats does not impair the pulsatility of GH secretion but lowers the pulse amplitude and mean GH level. These results demonstrate that endogenous ghrelin acts to amplify the basic pattern of GH secretion established by the interplay of hypothalamic GH-releasing hormone and somatostatin. These studies demonstrate the feasibility of creating ghrelin analogs that are selective for specific GHS activities, as well as their utility in dissecting the role of ghrelin in both normal physiology and specific pathologies.

CONTROLLED TERM:

Check Tags: Male

Animals

Eating: DE, drug effects

Human

Peptide Hormones: AI, antagonists &amp; inhibitors

Peptide Hormones: PD, pharmacology

Peptide Hormones: PH, physiology

Peptide Hormones: TU, therapeutic use

Rats

\*Receptors, G-Protein-Coupled: AI, antagonists &amp; inhibitors

Weight Gain: DE, drug effects

0 (BIM-28163); 0 (Peptide Hormones); 0 (Receptors,

G-Protein-coupled); 0 (ghrelin); 0 (growth hormone

secretagogue receptor)

CAS REGISTRY NO.: 9002-72-6

DOCUMENT NUMBER: 2003566796

MEDLINE on STN

DOCUMENT ID: 12960078

TITLE: Alterations of plasma ghrelin levels in rats with

lipopolysaccharide-induced wasting syndrome and effects of

ghrelin treatment on the syndrome.

Hataya Yuji; Akamizu Takashi; Rosoda Hiroshi; Kanamoto

Naoretsu; Moriyama Keiji; Kangawa Kenji; Takaya Kazuhiko;

Nakao Kazuwa

Department of Medicine and Clinical Science, Kyoto

University Graduate School of Medicine, Kyoto 606-8507,

Japan.

Endocrinology, (2003 Dec) Vol. 144, No. 12, pp. 5365-71.

Electronic Publication: 2003-08-28.

Journal Code: 0375-0401. ISSN: 0013-7227.

United States

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DOCUMENT TYPE:	Journal; Article; (JOURNAL ARTICLE)
LANGUAGE:	English
FILE SEGMENT:	Abridged Index Medicus Journals: Priority Journals
ENTRY MONTH:	200401
ENTRY DATE:	Entered: 2003 Dec 16 Last Updated on STN: 2004 Jan 06 Entered Medline: 2004 Jan 05
ABSTRACT:	Ghrelin not only strongly stimulates GH secretion, but is also involved in energy homeostasis by stimulating food intake and promoting adiposity through a GH-independent mechanism. These effects of ghrelin may play an important role in the pathophysiology of inflammatory wasting syndrome, in which both the somatotropic axis and energy balance are altered. In this study we investigated plasma ghrelin concentrations after lipopolysaccharide (LPS) administration to rats, a model of the wasting syndrome and critical illness. In addition, the therapeutic potential of the antiwasting effects of ghrelin was explored using LPS-injected rats. A single LPS injection suppressed plasma ghrelin levels 6 and 12 h later. Maximal reduction was observed 12 h after LPS injection, in a dose-dependent manner. In contrast, plasma ghrelin levels were elevated after repeated LPS injections on d 2 and 5. Peripheral administration of ghrelin twice daily (10 nmol/rat) for 5 d increased body weight gain in repeated LPS-injected rats. Furthermore, both adipose tissue weight and plasma leptin concentrations were increased after ghrelin administration in these rats. In conclusion, plasma ghrelin levels are altered in LPS-injected rats, and ghrelin treatment may provide a new therapeutic approach to the wasting syndrome and critical illness.
CONTROLLED TERM:	
Check Tags:	Male
Adipose Tissue:	AH, anatomy & histology
Adipose Tissue:	DE, drug effects
Animals:	DE, drug effects
Eating:	DE, drug effects
Leptin:	BL, blood
Lipopolysaccharides:	
Organ Size:	DE, drug effects
*Peptide Hormones:	BL, blood
*Peptide Hormones:	PD, pharmacology
Radioimmunoassay:	
Rats:	
Rats, Mistar:	
Spleen:	AH, anatomy & histology
Spleen:	DE, drug effects
*Wasting Syndrome:	BL, blood
*Wasting Syndrome:	CI, chemically induced
CHEMICAL NAME:	0 (Leptin); 0 (Lipopolysaccharides); 0 (Peptide Hormones); 0 (ghrelin)
L99 ANSWER 18 OF 66	MEDLINE on STN
ACCESSION NUMBER:	2003411230
DOCUMENT NUMBER:	PubMed ID: 12951072
TITLE:	Ghrelin promotes pancreatic adenocarcinoma cellular proliferation and invasiveness.
AUTHOR:	Duxbury Mark S; Wasseem Talat; Ito Hiromichi; Robinson Malcolm K; Zinner Michael J; Whang Edward E
CORPORATE SOURCE:	Department of Surgery, Brigham and Women's Hospital,
CONTRACT NUMBER:	Harvard Medical School, Boston, MA 02115, USA. DK 47326 (NIDDK) DK 47326 (NIDDK)

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Biochemical and biophysical research communications, (2003

Sep 19) Vol. 309, No. 2, pp. 466-8.

Journal code: 0372516. ISSN: 0006-291X.

United States

(COMPARATIVE STUDY)

Journal; Article; (JOURNAL ARTICLE)

(RESEARCH SUPPORT, NON-U.S. GOV'T)

(RESEARCH SUPPORT, U.S. GOV'T, P.H.S.)

English

Priority Journals

200310

Entered STN: 3 Sep 2003

Last Updated on STN: 1 Nov 2003

Entered Medline: 31 Oct 2003

**ABSTRACT:** Ghrelin, a newly described potent orexigenic peptide, may have therapeutic potential in patients with cachexia. We assessed whether pancreatic adenocarcinoma, commonly associated with marked cachexia, is a \*\*\*ghrelin\*\* -responsive malignancy. Pancreatic adenocarcinoma cells were exposed to ghrelin (0-100 nM). Proliferation was determined by MTT assay. Ghrelin, ghrelin Ia and Ib receptor expression and Akt phosphorylation were assessed. The effects of ghrelin (+/- its antagonist D-Lys-GRP6, or the PI3-K inhibitor Wortmannin) on cellular motility and invasiveness were quantified by Matrigel Boyden chamber assay. All cell lines expressed ghrelin Ia and Ib receptor transcript and protein, but only Panc1 weakly expressed ghrelin transcript. Ten nanomolar \*\*\*ghrelin\*\* increased proliferation, motility, invasiveness, and Akt phosphorylation in all cell lines. Proliferation was affected dose-dependently, being suppressed at higher ghrelin concentrations. D-Lys-GRP6 suppressed ghrelin-induced proliferation, invasion, and Akt phosphorylation. Wortmannin abolished the effects of ghrelin on motility and invasiveness. Pancreatic adenocarcinoma is a ghrelin -responsive malignancy.

**CONTROLLED TERM:**

\*Adenocarcinoma: CO, Complications

Androstadienes: PD, Pharmacology

Cachexia: DR, drug therapy

Cachexia: ET, etiology

Cell Division: DF, drug effects

Dose-Response Relationship, Drug

Neoplasm Invasiveness.

Pancreatic Neoplasms: CO, complications

\*Pancreatic Neoplasms: PA, pathology

Peptide Hormones: PD, pharmacology

Peptide Hormones: TU, therapeutic use

Tumor Cells, Cultured: DE, drug effects

Tumor Cells, Cultured: ME, metabolism

Tumor Cells, Cultured: PA, pathology

19345-26-7 (wortmannin)

0 (Androstadienes); 0 (Peptide Hormones); 0 (ghrelin)

CAS REGISTRY NO. : 19345-26-7 (wortmannin)

CHEMICAL NAME:

L99 ANSWER 19 OF 66 MEDLINE ON STN

ACCESSION NUMBER: 2003055497 MEDLINE Full-text

DOCUMENT ID: 12265855

TITLE: Anti-cachetic effect of ghrelin in nude mice bearing human melanoma cells.

Hanada Takeshi; Toshimai Koji; Kajimura Naoko; Nara-Ashizawa Noriko; Tsukada Toshihiko; Hayashi Yujirō; Osuye Kazuhiro; Kangawa Kenji; Matsukura Shigeru; Nakazato

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Masamitsu

Third Department of Internal Medicine, Miyazaki Medical

College, Miyazaki 889-1692, Japan.

Biochemical and biophysical research communications, (2003

Feb 7) Vol. 301, No. 2, pp. 275-9.

Journal Code: 0372516. ISSN: 0006-291X.

United States

Journal; Article; (JOURNAL ARTICLE)

(RESEARCH SUPPORT, NON-U.S. GOV'T)

(RESEARCH SUPPORT, U.S. GOV'T, P.H.S.)

English

Priority Journals

200304

Entered STN: 3 Sep 2003

Last Updated on STN: 17 Apr 2003

Entered Medline: 15 Apr 2003

**ABSTRACT:**

Ghrelin is a novel brain-gut peptide that stimulates food intake and body weight gain. We studied the anabolic effect of ghrelin in a cancer cachexia mouse model. SEK1, a human melanoma cell line, was inoculated into nude mice to examine the effects of ghrelin on food intake and body weight. The intraperitoneal administration of ghrelin twice a day (6 nmol/mice/day) for 6 days suppressed weight loss in SEK1-inoculated mice and increased the rate of weight gain in vehicle-treated nude mice.

\*\*\*Ghrelin\*\*\* administration also increased food intake in both SEK1- and vehicle-treated mice. Both the weight of white adipose tissue and the plasma leptin concentration were reduced in tumor-inoculated mice compared with vehicle-treated mice; these factors increased following ghrelin administration. The levels of both ghrelin peptide and mRNA in the stomach were upregulated in tumor-inoculated mice. The anabolic effect of \*\*\*ghrelin\*\*\* efficiently reverses the cachexia in mice bearing SEK1 human melanoma. Ghrelin therefore may have a therapeutic ability to ameliorate cancer cachexia.

**CONTROLLED TERM:**

Check Tags: Female

Animals

Body Weight

\*Cachexia

Cell Transplantation

Growth Inhibitors: BL, blood

Humans

Injections, Intraperitoneal

\*Interleukin-6

Leptin: BL, blood

Leukemia Inhibitory Factor

Lymphokines: BL, blood

\*Melanoma: ME, metabolism

Mice

Inbred BALB C

Mice, Nude

Neoplasms: PP, physiopathology

Peptide Hormones: AD, administration &amp; dosage

\*Peptide Hormones: ME, metabolism

Stomach: ME, metabolism

Tumor Cells, Cultured

0 (Growth Inhibitors); 0 (Interleukin-6); 0 (LIF protein, human); 0 (Leptin); 0 (Leukemia Inhibitory Factor); 0 (Lif protein, mouse); 0 (Lymphokines); 0 (Peptide Hormones); 0 (ghrelin)

L99 ANSWER 20 OF 66 MEDLINE ON STN

CHEMICAL NAME:

ACCESSION NUMBER: 2002619389 MEDLINE Full-text

DOCUMENT NUMBER: PubMed ID: 123376579

**ABSTRACT:** The novel gastric hormone ghrelin has recently been identified as an important modulator of energy homeostasis. Leptin-responsive hypothalamic neuropeptide Y/Agouti-related protein neurons are believed to mediate afferent ghrelin signals. Little is known, however, about ghrelin-induced efferent signals. We therefore investigated if hypothalamic-pituitary axes have a role in transferring ghrelin-induced changes of energy balance to the periphery.

**RESEARCH METHODS AND PROCEDURES:** We subcutaneously injected hypophysectomized, as well as adrenalectomized, thyrodeectomized, and sham-operated control rats with GH secretagogues [ghrelin, growth hormone (GH)-releasing peptide] for 1 week. Body weight, food intake, and body composition (chemical carcass analysis) were analyzed and compared with vehicle-treated controls. In addition, we quantified circulating levels of endogenous ghrelin in hypophysectomized and GH-treated normal rats.

**RESULTS:** GH-secretagogue treatment of sham-operated control rats dose-proportionally increased food intake, body weight, and fat mass compared with vehicle-injected controls ( $p < 0.01$ ). These effects, however, were not observed in ghrelin-treated hypophysectomized, thyrodeectomized, or adrenalectomized rats, indicating an essential role for the pituitary axis in ghrelin-induced adiposity. Circulating levels of endogenous ghrelin were reduced by administration of GH in normal rats and were about 3-fold higher in hypophysectomized rats ( $n = 20$ ,  $p = 0.001$ ), suggesting a regulatory feedback loop involving the stomach and the pituitary to regulate gastric ghrelin secretion.

**DISCUSSION:** According to these results, the endocrine pituitary is involved in the regulation of ghrelin secretion through a gastro-hypophyseal

Check Tags: Male  
Adipose Tissue: ME, metabolism

### \*Adipose Tissue: PH, physiology

Adrenalectomy  
Animals  
Body Weight: DE: drug effects

\* Boddy Meitghe: Ph. Physiologe

Eating: DE, drug effects  
Eating: PH, physiology

Growth Hormone: ME, metabolism

### Growth Hormone: PD, pharmacology

## Hypophysectomy

Hypothalamo-Hypophyseal System.

\* HYB834A1A88-HM system.

### Hypothalamic-Hypophyseal System

#### Oligopeptides: PD, pharmacology

卷之三

Peptide Hormones: BI; blood	
Peptide Hormones: ME; metabolism	
*Peptide Hormones: PD; pharmacology	
*Peptide Hormones: SE; secretion	
Pituitary-Adrenal System: DE; drug effects	
Pituitary-Adrenal System: ME; metabolism	
*Pituitary-Adrenal System: PH; physiology	
Rats	Sprague-Dawley
Thyroidectomy	
17763-96-6 (Insulin-Like Growth Factor 1); 87616-84-0 (growth hormone releasing hexapeptide); 9002-72-6 (Growth Hormone)	
0 (Oligopeptides); 0 (Peptide Hormones); 0 (ghrelin); 0 (growth hormone-releasing peptide-2)	
CAS REGISTRY NO.:	199 ANSWER 21 OF 66 MEDLINE ON STN
ACCESSION NUMBER:	2001643003 MEDLINE Full-Text
DOCUMENT NUMBER:	PubMed ID: 11679419
TITLE:	Chronic central infusion of ghrelin increases hypothalamic neuropeptide Y and Agouti-related protein mRNA levels and body weight in rats.
AUTHOR:	Kamegai J; Tamura H; Shimizu T; Ishii S; Sugihara H; Wakabayashi I
CORPORATE SOURCE:	Department of Medicine, Nippon Medical School, Tokyo, Japan.. jkaneigai@nms.ac.jp
SOURCE:	Diabetes. (2001 Nov) Vol. 50, No. 11, pp. 2438-43.
PUB. COUNTRY:	United States
DOCUMENT TYPE:	Journal Article; (JOURNAL ARTICLE)
LANGUAGE:	English
FILE SEGMENT:	Abridged Index Medicus Journals; Priority Journals
ENTRY MONTH:	200112
ENTRY DATE:	Entered STN: 7 Nov 2001 Last Updated on STN: 23 Jan 2002 Entered Medline: 7 Dec 2001
ABSTRACT:	Ghrelin, an endogenous ligand for the growth hormone secretagogue receptor (GHS-R), was originally purified from the rat stomach. Like the synthetic growth hormone secretagogues (GHSs), ghrelin specifically releases growth hormone (GH) after intravenous administration. Also consistent with the central actions of GHSs, ghrelin-immunoreactive cells were shown to be located in the hypothalamic arcuate nucleus as well as the stomach. Recently, we showed that a single central administration of ghrelin increased food intake and Hypothalamic agouti-related protein (AGRP) gene expression in rodents, and the orexigenic effect of this peptide seems to be independent of its GH-releasing activity. However, the effect of chronic infusion of ghrelin on food consumption and body weight and their possible mechanisms have not been elucidated. In this study, we determined the effects of chronic intracerebroventricular treatment with ghrelin on metabolic factors and on neuropeptide genes that are expressed in hypothalamic neurons that have been previously shown to express the GHS-R and to regulate food consumption. Chronic central administration of rat ghrelin (1 microg/rat every 12 h for 72 h) significantly increased food intake and body weight. However, it did not affect plasma insulin, glucose, leptin, or GH concentrations. We also found that chronic central administration of ghrelin increased both neuropeptide Y (NPY) mRNA levels ( $151.0 \pm 10.1\%$ of saline-treated controls; $P < 0.05$ ) and GHRP mRNA levels ( $160.0 \pm 22.5\%$ of saline-treated controls; $P < 0.05$ ) in the arcuate nucleus. Thus, the primary hypothalamic targets of ghrelin are

NPY/AGRP-containing neurons, and ghrelin is a newly discovered orexigenic peptide in the brain and stomach.

**CONTROLLED TERM:** Check Tag: Male

Animals

\*Body Weight: DE, drug effects  
Drug Administration Schedule

Eating: DE, drug effects

Gene Expression: DE, drug effects

Hypothalamus: DE, drug effects

\*Hypothalamus: ME, metabolism

Injections: Intraventricular

Intercellular Signaling Peptides and Proteins

\*Neuropeptide Y: ME, metabolism

\*Peptide Hormones AD, administration & dosage

Peptides: PD, pharmacology

\*Proteins: GE, genetics

Rats

Rats, Sprague-Dawley

0 (Intercellular Signaling Peptides and Proteins): 0  
(Neuropeptide Y): 0 (Peptide Hormones): 0 (Peptides): 0  
(Proteins): 0 (RNA, Messenger): 0 (agouti-related protein):  
0 (ghrelin)

**CHEMICAL NAME:**

L99 ANSWER 22 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 3  
146:1357979 CAPLUS Full-text

Compositions and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation.

**INVENTOR(S):** Meguid, Michael M.; Suzuki, Susumu

The Research Foundation of State University of New York, USA

U.S. Pat. Appl. Publ., 17pp.

CODEN: USXXCO

PATENT:

Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO. DATE APPLICATION NO. DATE

US 2005293233 A1 20061228 US 2006-347195 P 20050204

US 2005-65003P P 20050204

The present invention relates to compns. and methods for regulating body weight, and for treating conditions associated with obesity, particularly obesity-related diabetes. The present invention is premised on the discovery that body weight can be effectively regulated by modulating the levels and/or activities of two gut hormones, PYY and ghrelin.  
INCL 514012000  
CC 17-6 (Food and Feed Chemistry)  
Section cross-reference(s): 18, 63

IT Antidiabetic agents

Antioesity agents

Appetite stimulants

Food additives

(compns. and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation)

IT Appetite (control of; compns. and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation)

IT 106388-42-5, PYY 106388-42-5D, PYY, analogs 118997-30-1D, Human Peptide YY, amino acid sequence 3-36 246146-55-4, BIIE 0246 304953-26-7, Ghrelin 304853-26-7D, Ghrelin, analogs

RL: FFD (Food or feed use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(compns. and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation)

\*Neuropeptide Y: ME, metabolism

\*Peptide Hormones AD, administration & dosage

Peptides: PD, pharmacology

\*Proteins: GE, genetics

Rats, Sprague-Dawley

0 (Intercellular Signaling Peptides and Proteins): 0  
(Neuropeptide Y): 0 (Peptide Hormones): 0 (Peptides): 0  
(Proteins): 0 (RNA, Messenger): 0 (agouti-related protein):  
0 (ghrelin)

**CHEMICAL NAME:**

L99 ANSWER 23 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 6  
140:269531 CAPLUS Full-text

Compositions and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation

IT 106388-42-5, PYY 106388-42-5D, PYY, analogs 118997-30-1D, Human Peptide YY, amino acid sequence 3-36 246146-55-4, BIIE 0246 304953-26-7, Ghrelin 304853-26-7D, Ghrelin, analogs

RL: FFD (Food or feed use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(compns. and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation)

\*Neuropeptide Y: ME, metabolism

\*Peptide Hormones AD, administration & dosage

Peptides: PD, pharmacology

\*Proteins: GE, genetics

Rats, Sprague-Dawley

0 (Intercellular Signaling Peptides and Proteins): 0  
(Neuropeptide Y): 0 (Peptide Hormones): 0 (Peptides): 0  
(Proteins): 0 (RNA, Messenger): 0 (agouti-related protein):  
0 (ghrelin)

**CHEMICAL NAME:**

L99 ANSWER 24 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 6  
140:269531 CAPLUS Full-text

Compositions and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation.

IT Meguid, Michael M.; Suzuki, Susumu

The Research Foundation of State University of New York, USA

U.S. Pat. Appl. Publ., 17pp.

CODEN: USXXCO

PATENT:

Patent

LANGUAGE: English

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US 2005-65003P P 20050204

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INCL 514012000  
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Section cross-reference(s): 18, 63

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IT 106388-42-5, PYY 106388-42-5D, PYY, analogs 118997-30-1D, Human Peptide YY, amino acid sequence 3-36 246146-55-4, BIIE 0246 304953-26-7, Ghrelin 304853-26-7D, Ghrelin, analogs

RL: FFD (Food or feed use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

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\*Neuropeptide Y: ME, metabolism

\*Peptide Hormones AD, administration & dosage

Peptides: PD, pharmacology

\*Proteins: GE, genetics

Rats, Sprague-Dawley

0 (Intercellular Signaling Peptides and Proteins): 0  
(Neuropeptide Y): 0 (Peptide Hormones): 0 (Peptides): 0  
(Proteins): 0 (RNA, Messenger): 0 (agouti-related protein):  
0 (ghrelin)

**CHEMICAL NAME:**

L99 ANSWER 25 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 6  
140:269531 CAPLUS Full-text

Compositions and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation

IT Meguid, Michael M.; Suzuki, Susumu

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INCL 514012000  
CC 17-6 (Food and Feed Chemistry)

Section cross-reference(s): 18, 63

IT Antidiabetic agents

Antioesity agents

Appetite stimulants

Food additives

Disclosed are novel methods that generally rely on immunization against autologous ghrelin. Immunization is preferably effected by administration of analogs of autologous ghrelin, said analogs being capable of inducing antibody production against the autologous ghrelin polypeptides. Especially preferred

as an immunogen is autologous ghrelin, which has been modified by introduction of one single or a few foreign, immunodominant and promiscuous T-cell epitopes. Also disclosed are nucleic acid vaccination against ghrelin and vaccination using live vaccines as well as methods and means useful for the vaccination. Such methods and means include methods for the preparation of analogs and pharmaceutical formulations, as well as nucleic acid fragments, vectors, transformed cells, polypeptides and pharmaceutical formulations.

IC ICM A61K039-39  
CC A61K039-385; A61K039-00; C07K014-435; A61P003-04

Section cross-reference(s): 3, 63  
IT Animal group  
Animal cell  
Animal cell line  
Animals  
Anorexia  
Antigen presentation  
Antigen-presenting cell  
Bos taurus  
Burn  
Cachexia  
Canis familiaris  
DNA sequences  
Epitopes  
Eubacteria  
Eukaryota  
Fungi  
Genetic vectors  
Human  
Immunostimulants  
Immunotherapy  
Influenza virus  
Microorganism  
Molecular cloning  
Mus  
Obesity  
PCR (polymerase chain reaction)  
Plant cell  
Plasmidum falciparum  
Prokaryota  
Protein sequences  
Protozoa  
Rattus  
Streptomyces  
Sus scrofa domestica  
Viral vectors  
Wound  
Yeast

CDNA sequences  
(autologous ghrelin and encoding nucleic acid and foreign T cell epitope conjugates for vaccination against obesity and excess body fat increase or loss)  
IT Body weight  
(excess gain; autologous ghrelin and encoding nucleic acid and foreign T cell epitope conjugates for vaccination against obesity and excess body fat increase or loss)  
IT Body weight  
(loss; autologous ghrelin and encoding nucleic acid and foreign T cell epitope conjugates for vaccination against obesity and excess body fat increase or loss)

IT 126779-13-3P 126779-14-4P 161147-59-7P 304653-26-7P, 674383-03-6P 674383-83-4P 674383-85-8P  
EU: BPN (Biosynthetic preparation); BSU (Biological study, unclassified); PEP (Properties); THU (Therapeutic use); BIOL (Biological study); REP (Preparation); USES (Uses)  
(autologous ghrelin and encoding nucleic acid and foreign T cell epitope conjugates for vaccination against obesity and excess body fat increase or loss)  
REFERENCE COUNT: 7 THERE ARE 7 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 24 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 7					
ACCESSION NUMBER:	1004:80708 CAPLUS Full-text	DOCUMENT NUMBER:	140:14069	TITLE:	Synthesis and therapeutic uses of ghrelin analogs
INVENTOR(S): Dong, Zheng Xin; Shen, Yeliana		PATENT ASSIGNEE(S): Scientifiques (S.C.R.A.S.) Societe De Conseils De Recherches Et D'Application, Fr.		SOURCE: PCR Int. Appl., 99 pp.	COPEN: PIXXD2, 99 pp.
DOCUMENT TYPE: Patent		LANGUAGE: English			
FAMILY ACC. NUM. COUNT: 1		PATENT NO.:	A2	DATE: 20040129	APPLICATION NO.: WO 2003-WS22925
WO 2004009616	A3	WO 2004009616	20060209	-----	20030223
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LR, LS, LT, LU, LV, MA, MD, MG, MN, MX, MZ, NI, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW, RW: GH, GM, KE, IS, MN, MZ, SD, SL, TZ, UG, 2M, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, CA 2491946	20040129	CA 2003-2491946	20030223		
AU 2003234119	A1	AU 20040209	AU 2003-254119	EP 1578778	EP 2003-765930
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ,	20060913	CN 2003-817446	20030223		
JP 2006515271	T	JP 2004-23304	JP 2004-233045	JP 20060525	20030223
CN 1832753	A	BR 200312871	BR 2003-12871	BR 20030710	20030223
NO 2005000083	A	NO 20050323	NO 2005-83	20050106	20050106
MX 2005PA00908	A	20050722	MX 2005-PA908	20050121	20050121
US 20052272648	A1	20051208	US 2005-522398	20050208	20050208
IN 2005KN00153	A	20060609	IN 2005-RN153	US 2002-397834P	P 20020723
PRIORITY APPLN, INFO :				US 2002-427488P	P 20021119
				WO 2003-US22925	W 2003073
AB The invention comprises the synthesis of peptidyl ghrelin analogs that possess agonist or antagonist activity toward growth hormone secretagogue receptor, along with therapeutic and non-therapeutic uses thereof.					
IC ICM C07K					
CC 2-10 (Mammalian Hormones)					

Section cross-reference(s) : 34	
AIDS (disease)	
Anorexia	
Bulimia	
Cachexia	
Chemotherapy	
Dialysis	
Immobilization, animal	
Radiotherapy	
{associated weight loss; synthesis and therapeutic uses of ghrelin logs}	
Cachexia	(cancerous, -associated weight loss; synthesis and therapeutic uses of ghrelin analogs)
Calculi, biliary	
Hypertension	
Neoplasms	
Osteoarthritis	(excessive weight contributing to; synthesis and therapeutic uses of

**Ghrelin analogs:**

- Body weight (gain and maintenance; synthesis and therapeutic uses of ghrelin analogs)
- Body weight (loss, accessory to another disorder; synthesis and therapeutic uses of ghrelin analogs)
- Antiarthritis
- Antidiabetic agents
- Antihypertensives
- Antiobesity agents
- Appetite depressants
- Appetite stimulants
- Cardiovascular agents
- Cardiovascular system, disease
- Diabetes mellitus

Human	Obesity	Sexual disorders	Wound	Wound healing promoters
Human	Obesity	Sexual disorders	Wound	Wound healing promoters
Human	Obesity	Sexual disorders	Wound	Wound healing promoters
Human	Obesity	Sexual disorders	Wound	Wound healing promoters
Human	Obesity	Sexual disorders	Wound	Wound healing promoters

RL: PAC (Pharmacological activity); SPN (Synthetic preparation);  
THU (Therapeutic use); BIOL (Biological study); PREP

(synthesis and therapeutic uses of ghrelin analogs)

199 ANSWER 25 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 8  
ACCESSION NUMBER: 2005:39382 CAPLUS Full-text  
DOCUMENT NUMBER: 142:233614  
TYPE: Novel ghrelin analogs with improved affinity

GH secretagogue receptor stimulate GH and prolactin release from human pituitary cells  
 Rubinfeld, H.; Hadani, M.; Taylor, J. E.; Dong, J. Z.;  
 Constock, J.; Shen, Y.; De oliveira, D.; Datta, R.;  
 Culter, M. D.; Shimon, I.  
 Institute of Endocrinology, Chaim Sheba Medical  
 Center, Tel-Hashomer, 52621, Israel  
*European Journal of Endocrinology* (2004), 151(6),  
 655-662

**PUBLISHER:** BioScientifica Ltd.  
**DOCUMENT TYPE:** Journal  
**LANGUAGE:** English  
**ABSTRACT:** Ghrelin, a recently identified 28-amino acid peptide is a potent GH secretagogue (GHS) produced predominantly by the stomach. Ghrelin stimulates GH secretion through binding to the GHS receptor in the hypothalamus and stimulates the pituitary gland.

pituitary. In addition to the GH-releasing action, ghrelin has been found to be a powerful orexigenic factor. To assess the direct *in vitro* effects of ghrelin on human pituitary hormone secretion the authors have produced a panel of novel ghrelin analogs (mol. weight, 3323-3381; human native ghrelin, 3371) with enhanced affinity for the human GHS receptor (IC<sub>50</sub> 0.38-1.09 nM; human ghrelin, 1.2-2.2 nM). The peptide analogs were tested for their effect on GH secretion using dispersed human fetal pituitary cells (21 to 23 wk of gestation) and cultured GH- and prolactin (PRL)-secreting adenomas. The expression of the GHS receptor in normal (fetal and adult) human pituitary tissues, GH- and PRL-cell adenomas was established using RT-PCR. The effects of ghrelin, its analogs and GH-releasing hormone (GHRH) alone or in combination on GH and PRL secretion were compared at various concns. The ghrelin analogs stimulated GH release by 35-80% from human fetal pituitary cells (1-10 nM) and by 50-75% from cultured pituitary adenomas (10 nM). This releasing effect was dose-dependent, achieving maximal stimulation with its analogs at 100 nM. Human ghrelin was less potent as compared with its analogs in stimulating human GH, in keeping with the improved binding affinity of the analogs for the GHS-1a receptor. The ghrelin analogs and GHRH had comparable effects on GH secretion from both normal and adenomatous cells, and in combination produced an additive stimulatory effect on GH (150%). In contrast, ghrelin and its analogs induced a comparable increase in PRL release ranging between 25 and 40% from fetal cells and 30 and 70% from cultured PRL-cell and mixed GH-PRL adenomas. The authors' results have demonstrated for the first time that ghrelin analogs with enhanced affinity for the GHS receptor are potent stimulators of GH secretion from human pituitary cells, and thus may possess potential clin. therapeutic benefits.

CC 2-6 (Mammalian Hormones)

IT Pituitary gland, anterior lobe, neoplasm (adenoma; ghrelin analogs with improved affinity for GH and prolactin release from human pituitary cells)

IT 25279-04-8, Human ghrelin 304853-26-7D, Ghrelin, analogs 844819-35-8, BIM 28125 844819-36-9, BIM 28143 844819-37-0, BIM 28152 RL: PAC (Pharmacological activity); THU (therapeutic use); BIOL (Biological study); USES (Uses)

(ghrelin analogs with improved affinity for GH secretagogue receptor stimulation of GH and prolactin release from human pituitary cells)

THERE ARE 43 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

REFERENCE COUNT: 43

INVENTOR(S): Edwards, Bryan Michael; Welsh, Fraser Ewing; Boyle, Melanie; Lane, Steven Godfrey; Bland-Ward, Phillip; Antony; Sleeman, Matthew Alexander

CITATION(S): Cambridge Antibody Technology Limited, UK

PCT Int. Appl., 94pp.

CODEN: PIXXD2

Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT NO.: WO 2007099346

ACCESION NUMBER: A1

TITLE: 2007-GB741

DATE: 20070305

DOCUMENT TYPE: CAPLUS

DATE: 2007 ACS on STN

2007-998603, CAPLUS Full-TEXT

Human anti-human acyl-ghrelin antibodies and binding members for treating ghrelin related disease including obesity

INVENTOR(S): Edwards, Bryan Michael; Welsh, Fraser Ewing; Boyle, Melanie; Lane, Steven Godfrey; Bland-Ward, Phillip; Antony; Sleeman, Matthew Alexander

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CODEN: PIXXD2

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LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

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PCT Int. Appl., 94pp.

CODEN: PIXXD2

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FAMILY ACC. NUM. COUNT: 1

PATENT NO.: WO 2007099346

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PCT Int. Appl., 94pp.

CODEN: PIXXD2

Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT NO.: WO 2007099346

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INVENTOR(S): Edwards, Bryan Michael; Welsh, Fraser Ewing; Boyle, Melanie; Lane, Steven Godfrey; Bland-Ward, Phillip; Antony; Sleeman, Matthew Alexander

CITATION(S): Cambridge Antibody Technology Limited, UK

PCT Int. Appl., 94pp.

CODEN: PIXXD2

Patent

LANGUAGE: English</p

CF, CG, CI, CM, GA, GN, GO, GR, ML, MR, NE, SN, TD, TG, BW, GH,  
GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY,  
KG, KZ, MD, RU, TJ, TM

## PRIORITY APPLN INFO.:

AB Activation of nuclear factor kB (NF-kB) is involved in a number of diseases such as viral and bacterial infections, and cell proliferative disorders such as cancer and autoimmune disease. In certain instances, constitutive NF-kB activity has also been linked to the resistance of certain cancers to chemo and radiation therapy. The instant invention concerns method of inhibiting NF-kB activity in target cell populations by delivery of a polypeptide inhibitor of NF-kB (IkB). Methods of the invention may be used to treat diseases such as infections, and cell proliferative disorders. Methods for sensitizing cells to apoptosis and cytotoxic therapies are also described.

INCL 435325000; 435235100

CC 1-12 (Pharmacology)

IT INDEXING IN PROGRESS

IT Antitumor agents

Autoimmune disease

Bladder, neoplasm

Bone, neoplasm

Brain, neoplasm

Chemosensitizers, pharmaceutical

Cytotoxic agents

Esophagus, neoplasm

Gene therapy

Head and Neck, neoplasm

Human

Immunotherapy

Kidney, neoplasm

Leukemia

Liver, neoplasm

Lung, neoplasm

Mammary gland, neoplasm

Melanoma

Neoplasm

Ovary, neoplasm

Pancreas, neoplasm

Prostate gland, neoplasm

Radioisensitizers, biological

Radiotherapy

Skin, neoplasm

Spleen, neoplasm

Testis, neoplasm

Treatment of diseases and combination with other agents)

IT Uterus, neoplasm

(cervix; cell-targeted IkB for inhibition of NF-kB and treatment of diseases and combination with other agents)

IT Neoplasm, neoplasm

(colon; cell-targeted IkB for inhibition of NF-kB and treatment of diseases and combination with other agents)

IT Neoplasm, neoplasm

(head and neck; cell-targeted IkB for inhibition of NF-kB and treatment of diseases and combination with other agents)

IT 50-14-6D, Calciforol, conjugates with IkB 50-56-6D, Oxytocin, conjugates with IkB 51-21-8, 5-Fluocortisol 51-41-2D, Noreadrenaline, conjugates with IkB 51-43-4D, Adrenalin, conjugates with IkB 51-48-9D, Thyroxine, conjugates with IkB

51-61-6D, Dopamine, conjugates with IkB 57-22-7, Vincristine 57-83-0D, Progesterone, conjugates with IkB 73-31-4D, Melatonin, conjugates with IkB 1133-25-5D, Secretin, conjugates with IkB 7689-03-4, Camptothecin 9002-60-2D, Adrenocorticotropic hormone, conjugates with IkB 9002-61-3D, Human chorionic gonadotropin, conjugates with IkB 9002-62-4D, Prolactin, conjugates with IkB 9002-64-6D, Parathyroid hormone, conjugates with IkB 9002-67-9D, Luteinizing hormone, conjugates with IkB 9002-68-0D, Follicle-stimulating hormone, conjugates with IkB 9002-71-5D, Thyroid-stimulating hormone, conjugates with IkB 9002-72-6D, Growth hormone, conjugates with IkB 9004-10-8D, Insulin, conjugates with IkB 9007-92-5D, Gastrin, conjugates with IkB 9014-42-0D, Thrombopoletin, Cholecystokinin, conjugates with IkB 9015-71-8D, Corticotropin-releasing hormone, conjugates with IkB 9034-39-3D, Growth hormone releasing hormone, conjugates with IkB 9034-40-6D, LH-RH, conjugates with IkB 9083-38-9D, MIF, conjugates with IkB 11000-17-2D, Antidiuretic hormone, conjugates with IkB 11002-13-4D, Angiotensinogen, conjugates with IkB 11096-26-7D, Erythropoletin, conjugates with IkB 24305-27-9D, Thyrotropin-releasing hormone, conjugates with IkB 32222-06-3D, Cilictritol, conjugates with IkB 33069-62-4, Paclitaxel 33419-42-0, Etoposide 5110-01-1D, Somatostatin, conjugates with IkB 61912-98-9D, Insulin-like growth factor, conjugates with IkB 61963-27-1, Cisplatin 23214-92-8, Doxorubicin 24305-27-9D, Thymosin-like growth factor, conjugates with IkB 62031-54-3D, Fibroblast growth factor, conjugates with IkB 62229-50-9D, Epidermal growth factor, conjugates with IkB 67763-96-6D, insulin-like growth factor-1, conjugates with IkB 81627-83-0D, Macrophage-colony stimulating factor, conjugates with IkB 82785-45-3D, Neuropeptide Y, conjugates with IkB 83869-56-1D, Granulocyte-macrophage colony stimulating factor, conjugates with IkB 85637-73-6D, Atrial natriuretic peptide, conjugates with IkB 95058-81-4, Gemcitabine 106602-62-4B, Amylin, conjugates with IkB 106356-32-3D, Oncostatin M, conjugates with IkB 126339-09-1B, Peptide YY(3-36), conjugates with IkB 127464-60-2D, Vascular endothelial growth factor, conjugates with IkB 143011-72-7D, Granulocyte-colony stimulating factor, conjugates with IkB 169494-85-3D, Leptin, conjugates with IkB 179324-69-7, Velcade 304853-26-7D, Ghrelin, conjugates with IkB FL: PAC (Pharmacological activity) ; THU (Therapeutic use) ; BIOL (Biological study) ; USES (uses) (cell-targeted IkB for inhibition of NF-kB and treatment of diseases and combination with other agents)

L99 ANSWER 28 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2007:230501 CAPLUS Full-text  
DOCUMENT NUMBER: 146:238657  
TITLE: Fusion products of human serum albumin and therapeutic proteins for use in the treatment of disease  
INVENTOR(S): Rosen, Craig A.; Hasseltine, William A.; Moore, Paul A.; Bock, Jason B.; Bell, Adam; Shi, Yanggu; Lafleur, David W.  
PATENT ASSIGNEE(S): Human Genome Sciences, Inc., USA

U.S. Pat. Appl. Publ., 182pp., Cont.-in-part of Appl.

No. PCT/US2005/004041.

CODEN: USXXCO

Patent

English

3

## SOURCE:

DOCUMENT TYPE:

PATENT ACC. NUM. COUNT:

PATENT INFORMATION:

PATENT NO.:

KIND:

DATE:

APPLICATION NO.:

DATE:

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89150-14-1DP, Glucagon-like peptide I, fusion products with human serum albumin 106388-42-5DP, Peptide YY, fusion products with human serum albumin 116243-73-3DP, Endothelin, fusion products with human serum albumin 117830-04-0DP, C-Type natriuretic peptide, fusion products with human serum albumin 143863-92-7DP, Dendrosipin, natriuretic peptide, fusion products with human serum albumin 154835-90-2DP, Adrenomedilin, natriuretic peptide, fusion products with human serum albumin 165724-54-9DP, Long-acting fusion products with human serum albumin 185207-03-4DP, Kalluretic peptide, fusion products with human serum albumin 185207-39-6DP, Ghrelin, fusion products with human serum albumin 188138-21-4DP, Metasin, fusion products with human serum albumin 201615-39-5DP,  $\beta$ -Defensin 2, fusion products with human serum albumin 304853-28-6DP, THU (Therapeutic use); BIOL (Biological study); PRDP (Preparation); USES (Uses) (fusion products of human serum albumin and therapeutic proteins for use in treatment of disease)

L99 ANSWER · 29 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
DOCUMENT NUMBER: 2000175512 CAPLUS Full-text  
146-2226617  
TITLE: Preparation of tryptophan-derived triazole derivatives  
as ghrelin analogue ligands of growth hormone  
secretagogue receptors  
INVENTOR(S): Perrissoud, Daniel; Matinez, Jean; Moulin, Aline; Ferrentz, Jean-Alain; Boeglin, Damien; Demange, Luc  
PATENT ASSIGNEE(S): Zentaris GmbH, Boeblingen, Baden-Wuerttemberg, Germany; Le Centre National de la Recherche Scientifique, University of Montpellier II; University of Montpellier, France  
SOURCE: U.S. Pat. Appl. Publ., 123 pp.  
DOCUMENT TYPE: Patent  
LANGUAGE: English  
FAMILY ACC. NUM. COUNT: 2  
PATENT INFORMATION:  
PATENT NO.-----  
US 20070317857 A1 20070215 US 2006-502473  
US 2007208061 A2 20070906 EP 1757290 A1 20070228  
R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LI, LT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, AL, BA, HR, MK, YU  
PRIORITY APPLN. INFO.: US 2005-707941P EP 2005-17732 P 20050915 US 2006-787543P P 20060331

OTHER SOURCE(S): MARPAT 146:222617  
AB The invention provides novel triazole derivs. I [R1, R2 are H, (cyclo)alkyl, (hetero)aryl, heterocyclyl, sulfonyl, etc.; one of R3 and R4 is H and the other is (cyclo)alkyl, (hetero)aryl, (heterocyclyl), (cyclo)alkyl, or cycloalkylalkyl; n is 0-2] as ghrelin analog ligands of growth hormone secretagogue receptors that are useful in the treatment or prophylaxis of physiol. and/or pathophysiol. conditions in mammals, preferably humans, that are mediated by GHS receptors. The invention further provides GHS receptor antagonists and agonists that can be used for modulation of these receptors and are useful for treating conditions such as growth retardation, cachexia, and

(treatment of; fusion products of human serum albumin and therapeutic proteins for use in treatment of disease)  
901-08-5DP, Butyrylcholinesterase, fusion products with human serum albumin 9001-67-6DP, Neuraminidase, fusion products with human serum albumin 9002-12-4DP, Uricase, fusion products with human serum albumin 902-72-6DP, Somatotropin, fusion products with human serum albumin 90279-98-9DP, fusion products with human serum albumin 37228-64-1DP, fusion products with human serum albumin 62340-23-0DP, Oxyntomodulin, fusion products with human serum albumin 67763-96-6DP, IGF-1, fusion products with human serum albumin 83632-28-2DP, Calcitonin gene-related peptide, fusion products with human serum albumin 85637-13-0DP, Attial natriuretic peptide, fusion products with human serum albumin

short-, medium- and/or long term regulation of energy balance or food intake, adipogenesis, adiposity and/or obesity, body weight gain and/or reduction, diabetes, tumor cell proliferation, inflammation, and/or gastrectomy (ghrelin replacement therapy). Thus, compound II was prepared by reactions of Boc-protected D-triptophan, 2,4-dimethoxybenzylamine, 3-(1H-indol-3-yl)propanoic hydrazide, and Boc-2-amino-2-methylpropenoic acid. A figure shows biol. activity of II, i.e., the calculated dose-response plots of the in vitro intracellular calcium release assay with human GHS-R1a transfected CHO cells (GHS antagonist values IC<sub>50</sub> = 1.42 × 10<sup>-6</sup> and K<sub>b</sub> = 1.23 × 10<sup>-8</sup> M).

INCL 514341000: 514383000

CC (Amino Acids, Peptides, and Proteins)

Section cross-reference(s): 1, 2, 28

IT Alzheimer's disease

Anorexia

Anti-Alzheimer's agents

Anti-inflammatory agents

Antidepressants

Antidiabetic agents

Antihypertensives

Antiobesity agents

Antitumor agents

Anxiety

Anxiolytics

Body weight

Cachexia

Central nervous system, disease

Cushing's syndrome

Energy balance

Feeding

Heart, disease

Heart failure

Honeostasis

Hunger

Hypertension

Hypothenmia

Immunity

Immunodeficiency

Immunosuppression

Inflammation

Lipodystrophy

Lung, disease

Multiple sclerosis

Neoplasm

Osteoporosis

Ovulation induction

Pader-Willi syndrome

Schizophrenia

Sleep disorders

Transplant and Transplantation

Turner Syndrome

Wound healing

(preparation of tryptophan-derived triazole derivs. as ghrelin analog

lignands of growth hormone secretagogue receptors)

IT Disease, animal

(wasting; preparation of tryptophan-derived triazole derivs. as

ghrelin analog lignands of growth hormone secretagogue receptors)

IT 304853-26-7DP, Ghrelin, analogs 925238-36-4P 925238-37-5P  
Ghrelin is an orexigenic hormone secreted from endocrine cells in the stomach and other tissues. Acylation of ghrelin is essential for appetite regulation.

Vigorous exercise induces appetite suppression, but this does not appear to be related to suppressed levels of total ghrelin. This study examined the effect of exercise and feeding on plasma acylated ghrelin and appetite. Nine male subjects aged 19–15 yr participated in two, 9-h trials (exercise and control) in a random crossover design. Trials began at 0800 in the morning after an overnight fast. In the exercise trial, subjects ran for 60 min at 72% of maximum oxygen uptake between 0800 and 0900. After this, they rested for 8 h and consumed a test meal at 1100. In the control trial, subjects rested for 9 h and consumed a test meal at 1100. Area under the curve values for plasma acylated ghrelin concentration (assessed from venous blood samples) were lower over the first 3 h and the full 9 h of the exercise trial compared with the control trial:  $317 \pm 135$  vs.  $510 \pm 16$  pg · ml $^{-1}$  · 3 h and  $917 \pm 342$  vs.  $1,401 \pm 521$  pg · ml $^{-1}$  · 9 h (means  $\pm$  SE) resp. ( $P < 0.05$ ). Area under the curve values for hunger (assessed using a visual scale) were lower over the first 3 h of the exercise trial compared with the control trial ( $P = 0.013$ ). These findings demonstrate that plasma acylated ghrelin concentration and hunger are suppressed during running.

CC 2-6 (Mammalian Hormones)

Section cross-reference(s): 13  
ST exercise acylated ghrelin appetite hunger

IT

(hunger was suppressed during and immediate after exercise in human)  
IT 304853-26-1D, Ghrelin, acylatedRL: BSU (Biological study, unclassified); BIOL (Biological study)  
REFERENCE COUNT: 51 THERE ARE 51 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 31 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER:

DOCUMENT NUMBER:

TITLE:

AUTHOR(S): Richards, A. Mark.; Pemberton, Chris J.; Bang, Angela S.; Soule, Steven G.; Yandle, Tim G.;

CORPORATE SOURCE: Christchurch Endocrinology Research Group, Department of Medicine, University of Otago, Christchurch, B140, N. Z.

SOURCE: Journal of Endocrinology (2007), 192(2), 313-323

CODEN: JOENAK; ISSN: 0022-0795

PUBLISHER: Society for Endocrinology

DOCUMENT TYPE:

LANGUAGE: English

AB Ghrelin is a 28 amino acid stomach peptide, derived from proghrelin(1-94), that stimulates GH release, appetite and adipose deposition. Recently, a peptide derived from proghrelin(53-75) – also known as obestatin – has been reported to be a physiol. antagonist of ghrelin known in the rat. Using four specific RIAs, we provide the first characterization of proghrelin(1-94) peptides in human plasma, their modulation by metabolic manipulation and their distribution in mammalian tissues. Ghrelin(1-28) immunoreactivity (IR) in human plasma and rat plasma/stomach consisted of major des-octanoyl and minor octanoylated forms, as determined by HPLC/RIA. Human plasma ghrelin(1-28) IR was significantly suppressed by food intake, oral glucose and 1 mg s.c. glucagon administration. Ghrelin(1-28) IR and proghrelin(29-94) IR peptide distributions in the rat indicated that the stomach and gastrointestinal tract contain the highest mts. of the peptides. Human and rat plasma and rat stomach exts. contained a major IR peak of proghrelin(29-94)-like peptide as determined by HPLC/RIA, whereas no obestatin IR was observed. Human plasma proghrelin(29-94)-like IR pos. correlated with ghrelin(1-28) IR, was significantly suppressed by food intake and oral glucose and shared with

ghrelin(1-28) IR a neg. correlation with body mass index. We found no evidence for the existence of obestatin as a unique, endogenous peptide. Rather, our data suggest that circulating and stored peptides derived from the carboxyl terminal of proghrelin (C-ghrelin) are consistent in length with proghrelin(29-94) and respond to metabolic manipulation, at least in man, in similar fashion to ghrelin(1-28).

CC 2-6 (Mammalian Hormones)

IT Body Weight (lean; characterization of mammalian plasma/tissue proghrelin peptides and influence of food intake, oral glucose and glucagon administration)

IT 9034-39-3, Somatotropin 37221-19-7, VIP 51110-01-1, Somatosstatin 5296-92-5, Motilin 82785-45-1, Neuropeptide Y 89750-14-1, GIP-1 111745-44-9, Neuropeptide U 126333-09-1 245359-74-4, Orexin (peptide) 304853-26-7D, Ghrelin, desoctanoyl

RL: BSU (Biological study, unclassified); BIOL (Biological study)  
(characterization of mammalian plasma/tissue proghrelin peptides and its cross reactivity with other peptides and hormones)

REFERENCE COUNT: 27 THERE ARE 27 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 32 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2007-808457 CAPLUS Full-text  
DOCUMENT NUMBER: 147-134801TITLE: Variations in the preproghrelin gene correlate with higher body mass index, fat mass, and body dissatisfaction in young Japanese women  
AUTHOR(S): Ando, Tetsuya; Ichimaru, Yuhei; Konjiki, Fujiko; Shioji, Masayasu; Komaki, Gen  
CORPORATE SOURCE: Department of Psychosomatic Research, National Institute of Mental Health, National Center of Neurology and Psychiatry, Kodaira, Tokyo, Japan  
SOURCE: American Journal of Clinical Nutrition (2007), 86(1), 25-32  
CODEN: AJCNAC; ISSN: 0002-9165  
PUBLISHER: American Society for Nutrition  
DOCUMENT TYPE: Journal  
LANGUAGE: EnglishAB Background: Ghrelin is an endogenous peptide that stimulates growth hormone secretion, enhances appetite, and increases body weight and may play a role in eating disorders. Objective: The purpose was to determine whether any preproghrelin gene variants are associated with anthropometric measures, circulating ghrelin, lipid concos., insulin resistance, or psychol. measures relevant to eating disorders in young women. Design: This cross-sectional study compared outcome measures between preproghrelin genotypes. The participants in the study included 264 Japanese women [university students, with a mean (±SD) age of 20.40 ± 1.0] with no history of eating disorders. The main outcomes were responses to the Eating Disorder Inventory-2 (EDI-2), anthropometric measures, measures of depression and anxiety, and fasting blood concns. of acylated or desacyl ghrelin, lipids, glucose, and insulin. Results: Two single nucleotide polymorphisms (SNPs) whose minor allele frequencies were >0.05—the Leu72Met (408C→A) SNP in exon 2 and the 3056 T→C SNP in intron 2—were used for association anal. The 3056C allele was significantly associated with a higher acylated ghrelin concentration ( $P = 0.0021$ ), body weight ( $P = 0.011$ ), body mass index ( $P = 0.007$ ), fat mass ( $P = 0.012$ ), waist circumference ( $P = 0.008$ ), and skinfold thickness ( $P = 0.011$ ) and a lower HDL-cholesterol concentration ( $P = 0.02$ ). Interestingly, the 3056C allele was related to elevated scores in the Drive for Thinness-body Dissatisfaction (DT-BD) subscale of the EDI-2 ( $P = 0.003$ ). Conclusion: Our findings suggest that the preproghrelin gene 3056T→C SNP is associated with

changes in basal ghrelin concns. and phys. and psychol. variables related to eating disorders and obesity.

CC 2-6 (Mammalian Hormones)

IT Body weight (lean; variations in preproghrelin gene correlated with insulin resistance, altered blood lipids, higher body mass index, fat mass, and body dissatisfaction in young Japanese women)

IT Body weight (loss; variations in preproghrelin gene correlated with insulin resistance, altered blood lipids, higher body mass index, fat mass, and body dissatisfaction in young Japanese women)

IT 50-99-7, D-Glucose, biological studies 57-88-5, Cholesterol, biological studies 30853-26-7D, Ghrelin, acylated RL: BSU (Biological study, unclassified); BIOL (Biological study) (variations in preproghrelin gene correlated with insulin resistance, altered blood lipids higher body mass index, fat mass, and body dissatisfaction in young Japanese women)

REFERENCE COUNT: 50 THERE ARE 50 CITED REFERENCES AVAILABLE IN THE RE FORMAT RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 33 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2006-821129 CAPLUS Full-text  
DOCUMENT NUMBER: 145:288954

TITLE: Regulation of food intake by acyl and des-acyl ghrelin in the goldfish

AUTHOR(S): Matsuda, Kouhei; Miura, Tohru; Kaiya, Hiroyuki; Maruyama, Keisuke; Shimakura, Sei-ichi; Uchiyama, Minoru; Kangawa, Kenji; Shioda, Seiji

CORPORATE SOURCE: Laboratory of Regulatory Biology, Graduate School of Science and Engineering, University of Toyama, Toyama, 930-8555, Japan

SOURCE: Peptides (New York, NY, United States) (2006), 27 (9), 2321-2325

PUBLISHER: Elsevier Inc.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB The authors' recent research has indicated that intracerebroventricular (ICV) and i.p. (IP) administration of n-octanoic acid-modified ghrelin (acyl ghrelin) stimulates food intake and locomotor activity in the goldfish. The manner in which peripherally administered acyl ghrelin regulates food intake, however, remains unclear. In contrast to acyl ghrelin, non-acylated ghrelin (des-acyl ghrelin) does not exert an orexigenic action or induce hyperactivity. To this extent, the biol. role of des-acyl ghrelin in fish is unknown. Given the possible involvement of afferent pathways in mediating the effects of acyl ghrelin, as is known to occur in rodents, the authors examined the effect of capsaicin, a neurotoxin which destroys primary sensory (vagal and splanchnic) afferents, on the orexigenic activity induced by IP-injected acyl ghrelin. Pretreatment with IP-injected capsaicin (0.16 μmol/g body weight (BW)) cancelled the orexigenic action of IP-injected acyl ghrelin (8 pmol/g BW), although IP-injected capsaicin alone did not affect food intake. The effect of des-acyl ghrelin on the orexigenic action of acyl ghrelin in the goldfish was also investigated. The ICV and IP injection of des-acyl ghrelin at doses 3-10 times higher than that of acyl ghrelin suppressed the orexigenic action of ICV- and IP-injected acyl ghrelin (doses of 1 and 8 pmol/g BW). In contrast, injection of des-acyl ghrelin alone did not show any inhibitory effect on food intake. These results suggest that, as is seen in rodents, circulating acyl ghrelin derived from peripheral tissues acts via primary sensory afferent pathways on feeding centers in the brain. The results also

show that des-acyl ghrelin inhibits acyl ghrelin-induced orexigenic activity in goldfish.

CC 12-6 (Norm mammalian Biochemistry)

ST goldfish des acyl ghrelin appetite sensory afferent

IT Appetite

Carassius auratus (regulation of food intake by acyl and des-acyl ghrelin in the goldfish)

IT 30485-26-7D, Ghrelin, des-n-octanoylated 304853-26-7D, Ghrelin, n-octanoylated

RL: BSU (Biological study, unclassified); BIOL (Biological study) (regulation of food intake by acyl and des-acyl ghrelin in the goldfish)

REFERENCE COUNT: 31 THERE ARE 31 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 34 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2006-121023 CAPLUS Full-text  
DOCUMENT NUMBER: 146:356416

TITLE: Differential effects of gastric bypass and banding on circulating gut hormone and leptin levels

AUTHOR(S): Konner, Judith; Inabnet, William; Connell, Irene M.; Taveras, Carmen; Daud, Anna; Olivero-Rivera, Lorraine; Restuccia, Nancy L.; Bessler, Marc

CORPORATE SOURCE: Department of Medicine, College of Physicians and Surgeons, Columbia University, New York, NY, USA

SOURCE: Obesity (2006), 14 (9), 1553-1561

CODEN: OBESAY; ISSN: 1930-7381

PUBLISHER: North American Association for the Study of Obesity

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Objective: To quantify plasma concns. of hormones that regulate energy homeostasis in order to establish possible mechanisms for greater weight loss after Roux-en-Y gastric bypass (RYGB) compared with gastric banding (BND). Research Methods and Procedures: Four groups of women were studied: lean (n = 8; mean BMI, 21.6 kg/m<sup>2</sup>); BND (n = 9; BMI, 35.8; 25% weight loss), RYGB (n = 9; BMI, 34.2; 36% weight loss), and controls matched for BMI to the surgical groups (n = 11; BMI, 34.4). Results: Fasting total peptide YY (PYY) and PYY(3-36) immunoreactivity were similar among all groups, but the postprandial response in the RYGB group was exaggerated, such that 30 min after the meal, total and PYY(3-36) levels were 2- to 4-fold greater compared with all other groups. Maximal postprandial suppression of total ghrelin was blunted in the BND group (13%) compared with RYGB (27%). Postprandial suppression of octanoylated ghrelin was also less in BND (29%) compared with RYGB (56%). Fasting insulin was lower in RYGB (6.6 μg/mL) compared with BND (10.0 μg/mL). Compared with lean controls, leptin concns. were significantly higher in BND but not in RYGB. There was a greater increase in post-meal satiety in the RYGB group compared with BND and overweight controls. Discussion: The differences between RYGB and BND subjects in postprandial concns. of PYY and ghrelin would be expected to promote increased satiety and earlier meal termination in RYGB and may aid in greater weight loss. The differences in insulin and leptin concns. associated with these procedures may also reflect differences in insulin sensitivity and energy partitioning.

CC 14-14 (Mammalian Pathological Biochemistry)

IT Blood plasma

Body weight

Hunger

Obesity

Postprandial period  
(differential effects of gastric bypass and banding on circulating gut hormone and leptin levels)

IT Body weight  
(loss; differential effects of gastric bypass and banding on circulating gut hormone and leptin levels)

IT Appetite  
(satiety; differential effects of gastric bypass and banding on circulating gut hormone and leptin levels)

IT 16494-85-3, Leptin, 304853-26-7, Ghrelin, octanoylated RL: (Biological study, unclassified); BIOL (Biological study)  
(differential effects of gastric bypass and banding on circulating gut hormone and leptin levels)

REFERENCE COUNT: 56 THERE ARE 56 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 35 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2006-521474 CAPLUS Full-text  
DOCUMENT NUMBER: 144:487839

CAROB pulp preparation rich in insoluble dietary fiber and polyphenols enhances lipid oxidation and lowers postprandial acylated ghrelin in humans

AUTHOR(S): Gruendel, Sindry; Garcia, Ada L.; Otto, Baerbel; Mueller, Corinna; Steiniger, Jochen; Weickert, Martin O.; Spech, Maria; Katz, Norbert; Koehnick, Corinna  
Dietary Fibre and the Metabolic Syndrome Group, German Institute of Human Nutrition Potsdam-Rehbruecke, Nuthetal, Germany

SOURCE: Journal of Nutrition (2006), 136(6), 1533-1538  
CODEN: JONUAI; ISSN: 0022-3166  
American Society for Nutrition

PUBLISHER: American Society for Nutrition

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Ghrelin is an orexigenic hormone that may affect substrate utilization in humans. Ghrelin is influenced by macronutrients, but the effects of insoluble dietary fiber and polyphenols are unknown. We investigated the effects of a polyphenol-rich insoluble dietary fiber preparation from carob pulp (carob fiber) on postprandial ghrelin responses and substrate utilization. Dose-dependent effects of the consumption of carob fiber were investigated in a randomized, single-blind, crossover study in 20 healthy subjects, aged 22-62 yr. Plasma total and acylated ghrelin, triglycerides, and serum insulin and nonesterified fatty acids (NEFA) levels were repeatedly assessed before and after ingestion of an isocaloric standardized liquid meal with 0, 5, 10, or 20 g of carob fiber over a 300-min period. The RQ was determined after consumption of 0 or 20 g of carob fiber. Carob fiber intake lowered acylated ghrelin to 49.1%, triglycerides to 97.2%, and NEFA to 67.2% compared with the control meal ( $P < 0.001$ ). Total ghrelin and insulin concns. were not affected by consumption of a carob fiber-enriched liquid meal. Postprandial energy expenditure was increased by 42.3% and RQ was reduced by 99.9% after a liquid meal with carob fiber compared with a control meal ( $P < 0.001$ ). We showed that the consumption of a carob pulp preparation, an insoluble dietary fiber rich in polyphenols, decreases postprandial responses of acylated ghrelin, triglycerides, and NEFA and alters RQ, suggesting a change toward increased fatty acid oxidation. These results indicate that carob fiber might exert beneficial effects in energy intake and body weight

CC 18-4 (Animal Nutrition)  
IT Blood plasma  
Blood serum  
Body weight

## Ceratonia siliqua

Dietary fiber

Dietary supplements

Energy metabolism, animal

Human

Lipid oxidation

Postprandial period

Respiration, animal

(carob pulp preparation rich in insoluble dietary fiber and polyphenols enhances lipid oxidation and lowers postprandial acylated ghrelin in humans)  
IT 50-93-7, D-Glucose, biological studies 9004-10-8, Insulin, biological studies 304853-26-7, Ghrelin 304853-26-7D, Ghrelin, acylated RL: BSU (Biological study, unclassified); BIOL (Biological study)  
(carob pulp preparation rich in insoluble dietary fiber and polyphenols enhances lipid oxidation and lowers postprandial acylated ghrelin in humans)

REFERENCE COUNT: 44 THERE ARE 44 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 36 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2006-517379 CAPLUS Full-text  
DOCUMENT NUMBER: 145:53635

Stimulatory effect of n-octanoylated ghrelin on locomotor activity in the goldfish, *Carassius auratus*

AUTHOR(S): Matsuda, Kouhei; Miura, Tohru; Kalya, Hiroyuki; Maruyama, Keisuke; Uchiyama, Minoru; Kangawa, Kenji; Shioda, Seiji  
Laboratory of Regulatory Biology, Graduate School of Science and Engineering, University of Toyama, Toyama, 930-8555, Japan

SOURCE: Peptides (New York, NY, United States) (2006), 27(6), 1335-1340  
CODEN: PTDDDS; ISSN: 0196-9781  
PUBLISHER: Elsevier Inc.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Ghrelin is implicated in growth and feeding regulation in fish. The influence of ghrelin on behavior has not been well studied and the physiol. role of des-fatty acid modification of this peptide is unclear. Therefore, the effects of intracheoroventricular (ICV) and i.p. (IP) administration of synthetic n-octanoylated (acyl) goldfish ghrelin and des-n-octanoylated (des-acyl) ghrelin on locomotor and orexigenic activity in the goldfish were examined. ICV administration of acyl ghrelin at doses of 1 and 2 pmol/g body weight (BW) and IP administration at 16 pmol/g BW both induced significant increases in locomotor activity during for 45-60 min after treatment. Cumulative food intake was significantly increased by ICV injection of acyl ghrelin at doses of 1 and 2 pmol/g BW and IP injection at 8 and 16 pmol/g BW during the 60-min post-treatment observation period. In contrast, ICV and IP administration of des-acyl ghrelin produced no changes in locomotor and orexigenic activity. The authors also analyzed fasting-induced changes in the expression of ghrelin mRNA in the brain and intestine using a real-time PCR method. The level of ghrelin mRNA in the intestine, but not in the brain, obtained from fish fasted for 7 days was significantly higher than that in fish that had been fed normally. These results suggest that, in the goldfish, acyl ghrelin, but not des-acyl ghrelin, stimulates locomotor activity and enhances food intake via central and peripheral pathways.

CC 12-6 (Nonmammalian Biochemistry)  
ST Goldfish ghrelin locomotor behavior appetite  
IT Appetite

Brain  
Carassius auratus  
Fasting  
Intestine

(stimulatory effect of n-octanoylated ghrelin on locomotor activity in the goldfish)

IT 304853-26-7D, Ghrelin, des-n-octanoylated 304853-26-7D,

Ghrelin, n-octanoylated

RL: BSU (Biological study, unclassified); BIOL (Biological study)  
(physiogenomics of weight loss induced by dietary carbohydrate restriction)

(stimulatory effect of n-octanoylated ghrelin on locomotor activity in the goldfish)

REFERENCE COUNT:

37 THERE ARE 37 CITED REFERENCES AVAILABLE IN THE RE FORMAT

RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 37 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2006764163 CAPLUS Full-text  
DOCUMENT NUMBER: 1467036

Physiogenomic analysis of weight loss induced by

dietary carbohydrate restriction

Ruano, Guadberto; Windemuth, Andreas; Kocherla, Mohan;  
Holford, Theodore; Fernandez, Maria Iuz; Forsythe,  
Cassandra E.; Wood, Richard J.; Kraemer, William J.;  
Volek, Jeff S.

Genomas, Inc., Hartford, CT, 06106, USA

Nutrition & Metabolism (2006), 3, No pp. given

CODEN: NNUEA; ISSN: 1743-0755

URL: <http://www.nutritionandmetabolism.com/content/pdf/1743-0755-3-20.pdf>

PUBLISHER: Biomed Central Ltd.

DOCUMENT TYPE: Journal: (online computer file)

LANGUAGE: English

AB Background: Diets that restrict carbohydrate (CHO) have proven to be a successful dietary treatment of obesity for many people, but the degree of weight loss varies across individuals. The extent to which genetic factors associate with the magnitude of weight loss induced by CHO restriction is unknown. The authors examined associations among polymorphisms in candidate genes with weight loss in 86 healthy adults who were instructed to restrict CHO to a level that induced a small level of ketosis (CHO approx.10% of total energy). A total of 27 single nucleotide polymorphisms (SNPs) were selected from 15 candidate genes involved in fat digestion/metabolism, intracellular glucose metabolism, lipoprotein remodeling, and appetite regulation. Multiple linear regression was used to rank the SNPs according to probability of association, and the most significant associations were analyzed in greater detail. Results: Mean weight loss was 6.4 kg. SNPs in the gastric lipase (LIPF), hepatic glycogen synthase (GYS2), cholesterin ester transfer protein (CETP), and galanin (GAL) genes were significantly associated with weight loss. Conclusion: A strong association between weight loss induced by dietary CHO metabolism, intravascular lipoprotein remodeling, and appetite were detected. These discoveries could provide clues to important physiol. adaptations underlying the body mass response to CHO restriction.

CC 18-4 (Animal Nutrition)  
IT Body weight (loss; physiogenomics of weight loss induced by dietary carbohydrate restriction)

IT 9001-62-1, Lipase 9004-02-8, Lipoprotein lipase 9014-56-6, Glycoen synthase 9026-00-0, Lysosomal acid lipase 9043-29-2, Endothelial lipase 82785-45-3, Neuropeptide Y 119418-04-1, Galanin

304853-26-7D, Ghrelin, precursor

RL: BSU (Biological study, unclassified); BIOL (Biological study)  
(physiogenomics of weight loss induced by dietary carbohydrate restriction)

REFERENCE COUNT: 44 THERE ARE 44 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

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relating to fat accumulation, activity of ameliorating heart function and activity of stimulating gastric acid secretion, of ghrelin, which regulator comprises a C2-35 fatty acids or their derivs. These ghrelin regulators are useful as functional food (or feed) and pharmaceutical to e.g. enhance phys. strength and beautify skin.

IC A61K031-19

ICS A61K031-20; A61K031-22; A61K031-23; A61P001-04; A61P003-14;

A61P003-00; A61P003-02; A61P003-04; A61P005-08; A61P009-00;

A61P017-02; A61P017-02; A61P019-10; A23L001-30

CC 2-10 (Mammalian Hormones)

Section cross-reference(s): S, 17, 18, 63

IT Animals

Anorexia

Domestic animal

Drug delivery systems

Drugs

Feed

Feed additives

Food

Food additives

Human

Malnutrition

Mammalia

(ghrelin regulator comprising C6-12 or C8-10 fatty acids or derivs. for food and pharmaceutical use)

IT 30853-26-7D, Ghrelin, acylated derivs.

RL: BSU (Biological study, unclassified); BIOL (Biological study)

(ghrelin regulator comprising C6-12 or C8-10 fatty acids or derivs. for food and pharmaceutical use)

REFERENCE COUNT: 20 THERE ARE 20 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

199 ANSWER 39 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

DOCUMENT NUMBER: 200511259412 CAPLUS Full-text

TITLE: Immunotherapy of obesity and appetite disorders

INVENTOR(S): Chariton, Keith; Porter, Andrew; Strachan, Gillian

PATENT ASSIGNEE (S): Haprogen Ltd., UK

SOURCE: PCT Int. Appl., 61 pp.

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2005113600	A2	20051201	WO 2005-GB1916	20050518
WO 2005113600	A3	20060608		
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GI, GR, HR, ID, IL, IN, IS, JP, KE, KG, KM, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MN, MW, MX, NA, NG, NI, NO, NZ, CM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SM, SY, TJ, TM, TN, TR, ZA, ZM, ZW				
RW: BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, VG, ZM, ZW, AM, AZ, BY, RG, RZ, MD, RU, TJ, TM, AV, BB, BG, CH, CY, C2, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, MC, NL, PL, PT,				

10/567406

RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GO, GW, ML, MR, NE, SN, TD, TG

PRIORITY APPLN. INFO.: GB 2004-11014 A 20040518

OTHER SOURCE(S): MARPAT 144:21844

AB The authors disclose methods for regulating food intake and weight gain/loss by selectively modulating the extracellular concentration of endogenous cannabinoid and digestive tract hormones. In one example, arachidonic acid derivs. are conjugated to carrier proteins and used to elicit rodent antibodies or to select antibodies from human libraries/. Furthermore, the conjugates may have application as vaccines.

IC ICM C07K016-00

CC 15-3 (Immunochemistry)

Section cross-reference(s): 14

ST antibody endocannabinoid immunotherapy obesity appetite disorder; ghrelin antibody immunotherapy obesity appetite disorder; neuropeptide Y antibody immunotherapy obesity appetite disorder

IT Antibesity agents

Appetite depressants

Appetite stimulants

(antibodies to endocannabinoids or digestive tract hormones derivs.)

Human

(antibodies to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)

IT Cannabinoids

RL: BSU (Biological study, unclassified); BIOL (Biological study)

(endocannabinoids; antibodies to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)

IT Antibodies and Immunoglobulins

RL: BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(monoclonal; to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)

IT Phage display library

RL: BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(of antibodies to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)

IT Vaccines

IT (of endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)

IT Immunotherapy

(of obesity or appetite disorders)

IT Antibodies and Immunoglobulins

RL: BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(single chain, 3AB12, 4AD, 3BE10 or 3BH10; to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)

IT Immunotherapy

(of obesity or appetite disorders)

IT Peptides and Peptides

RL: BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(3-acylserine derivs. 313951-59-6D, 3-acylserine derivs. 865989-43-5D, 3-acylserine derivs. 870491-48-8

RL: BSU (Biological study, unclassified); PRP (Properties); BIOL (Biological study)

(antibodies to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)

L99 ANSWER 39 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2005:1239564 CAPLUS Full-text



A61P037-04

CC 15-3 (Immunochemistry)

Section cross-reference(s) : 2

IT Affinity

Antiseraums

Antitumor agents

Blood, disease

Bone, disease

Brain, disease

Cartilage, disease

Fertility disorders

Growth disorders, animal

Immunodeficiency

Infection

Mammalia

Metabolic disorders

Neoplasm

Stabilizing agents

Urinary system, disease

(antibody specific to mammalian endogenous ligand without neutralizing activity to stabilize ligand and enhance receptor activity for treating diseases)

IT 133-25-5D Secretin, analogs

9002-72-6D, Growth hormone, analogs

9004-10-8D, Insulin, analogs

9007-12-9D, Calcitonin, analogs

9007-92-5D, Glucagon, analogs

9014-42-0D, Thrombopoietin, analogs

9034-40-6D, LHRH, analogs

11096-26-7D, EPO,

analogs

31721-19-0D, VIP, analogs

83869-56-1D, GM-CSF, analogs

8567-73-6D, Atrial natriuretic polypeptide, analogs

8970-14-1D, Glucagon-like peptide I, analogs

11471-18-0D, Brain natriuretic peptide, analogs

127830-04-0D, C-type natriuretic peptide, analogs

154835-90-2D, Adrenomedullin, analogs

163150-12-7D, Betacellulin, 'Y4' analogs

168494-85-3D, Leptin, analogs

304852-26-7D, Ghrelin, analogs

37210-33-0D, Apelin, analogs

388138-21-4D, Metastin, analogs

RL: BSU (Biological study, unclassified); THU (Use)

US5 (Use)

(antibody specific to mammalian endogenous ligand without neutralizing activity to stabilize ligand and enhance receptor activity for treating diseases)

REFERENCE COUNT:

11 THERE ARE 11 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 42 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2005-673405 CAPLUS Full-text

TITLE: Modified ghrelin peptide-VLP (virus-like particle)

INVENTOR(S): Bachmann, Martin F.; Fulurija, Alma

PATENT ASSIGNEE(S): Cytos Biotechnology A. G., Switz.

SOURCE: PCT Int. Appl., 101 pp.

CODEN: PIXXAD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM.: COUNT: 1

PATENT INFORMATION:

PATENT NO. -----

KIND -----

DATE -----

APPLICATION NO. -----

DATE -----

WO 2005-068639 A2 2005-0728 WO 2005-EF497 20050119

WO 2005-068639 A3 20060202

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH,

CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EG, EE, ES, FI, GB,

GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC,

LK, LR, LS, LT, LU, LV, MA, MD, MG, MN, MM, MX, MZ, NA, NI,

NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SL, SY,

TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, 2M, 2W, SM,

RW: BW, GH, GM, KE, LS, MW, MZ, NA, SD, SI, SZ, T2, UG, 2M, AM,

AE, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE,

EE, ES, FL, FR, GB, GR, HU, IE, IS, IT, LT, LU, MC, NL, PL, PT,

RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GO, GW, ML,

MR, NE, SN, TD, TG

AU 2005-205181 A1 20050728 AU 2005-205181

CA 2553594 A1 20050728 CA 2005-2553594

US 2005-191317 A1 20050728 US 2005-37396

EP 1709152 A2 20061004 EP 2005-701048

R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,

IE, SI, LT, FI, RO, CY, TR, BG, CZ, EE, HU, PL, SK, IS

CN 1905903 A 20070131 CN 2005-80001159

BR 2005-007002 A 20070605 BR 2005-7002

JP 2007518762 T 20070712 JP 2005-556027

IN 2006MM00834 A 20070323 IN 2006-MN834

MX 2006PA0170 A 20061002 MX 2006-PA170

- PRIORITY APPN. INFO. :

CN 1905903, AB

The inventors found that particular ghrelin peptides, which are bound to a core particle having a structure with an inherent repetitive organization, in particular to virus-like particles (VLPs), particularly when leading to highly ordered and repetitive conjugates, represent potent immunogens for the induction of specific antibody response against ghrelin. The invention provides a modified VLP comprising a VLP, derived from a bacteriophage, and particular peptides derived from ghrelin linked thereto, wherein said ghrelin-peptide does not contain a n-octanoyl-modification. The invention also provides a process for producing the modified ghrelin peptide-VLP. The modified ghrelin peptide-VLPs of the invention are useful in the production of safe vaccines for the treatment of obesity and other disease associated with increased food-uptake or increased body weight and to efficiently induce immune responses, in particular antibody responses. Thus, the inventors found that peptide 1-6, peptide 1-7 and peptide 1-8 coupled to VLPs constitute safe vaccines with the surprising ability to induce potent antibody responses cross-reacting with native ghrelin. Furthermore, the inventors found that surprisingly a ghrelin-peptide coupled via its C-terminus to the virus-like peptide was far more potent at reducing body weight-increase than a ghrelin-peptide coupled via its N-terminus to the VLP.

IC ICM C12N015-86

ICS A61K047-18

CC 15-2 (Immunochemistry)

Section cross-reference(s): 1, 2, 63

IT Body weight

(increased, control of, modified ghrelin peptide-VLP (virus-like particle) carrier conjugates, and immunogenic uses for treatment of obesity)

IT 30453-26-7D, Ghrelin, peptide-VLP conjugates

RL: BSU (Biological study, unclassified); PAC (Pharmacological activity); PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(modified ghrelin peptide-VLP (virus-like particle) carrier conjugates, and immunogenic uses for treatment of obesity)

L99 ANSWER 43 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2005:269024 CAPLUS Full-text  
 DOCUMENT NUMBER: 142:310203  
 TITLE: Effect of centrally administered C75, a fatty acid synthase inhibitor, on ghrelin secretion and its downstream effects

AUTHOR(S): Hu, Zhiyuan; Cha, Seung Hun; Van Haastert, Goedelle; Wang, Jing; Lane, M. Daniel  
 CORPORATE SOURCE: Department of Biological Chemistry, The Johns Hopkins University School of Medicine, Baltimore, MD, 21205, USA  
 SOURCE: Proceedings of the National Academy of Sciences of the United States of America (2005), 102(11), 3972-3977  
 CODEN: PNASAA; ISSN: 0027-8234  
 PUBLISHER: National Academy of Sciences  
 DOCUMENT TYPE: Journal  
 LANGUAGE: English  
 AB The central administration of the fatty acid synthase (FAS) inhibitor, C75, rapidly suppresses the expression of orexigenic neuropeptides (neuropeptide Y (NPY) and agouti-related protein (AgRP)) and activates expression of anorexigenic neuropeptides (proopiomelanocortin (POMC) and cocaine- and amphetamine-regulated transcript (CART)) in the hypothalamus. The combined actions of these changes inhibit food intake and decrease body weight. Intracerebroventricular injection of C75 appears to rapidly inhibit the secretion of ghrelin by hypothalamic explants ex vivo and by the stomach in vivo. Ghrelin administered intraceboventricularly reverses the anorexic effect of C75, suggesting that C75 acts upstream of ghrelin. Because ghrelin-producing neurons are known to form synapses onto NPY/AgRP neurons, the authors suggest that the reversal of C75-induced anorexia by ghrelin may be mediated by NPY/AgRP neurons. This hypothesis is supported by the finding that ghrelin reverses the C75-induced inactivation (assessed by c-Fos expression) of neurons in the arcuate nucleus that express NPY (assessed by immunohistochem. co-staining). These effects closely correlate with appropriate changes downstream in the expression of the hypothalamic neuropeptides that regulate feeding behavior, i.e., down-regulation of the expression of NPY and AgRP and up-regulation of the expression of proopiomelanocortin/α-MSH, provoked by C75 and reversed by ghrelin. The authors propose a model in which ghrelin secretion plays an intermediary role between malonyl-CoA, the substrate of fatty acid synthase, and the neural circuitry regulating energy homeostasis.

CC 2-6 (Mammalian Hormones)  
 ST Fatty acid synthase inhibitor effect on ghrelin secretion and its downstream effects  
 IT Appetite  
 Anorexia  
 Appetite  
 Body weight  
 Brain  
 Energy metabolism, animal  
 Stomach

(centrally administered fatty acid synthase inhibitor effect on ghrelin secretion and its downstream effects)

IT 52-14-1, Malonyl-CoA 9045-77-6, Fatty acid synthase 37213-49-3, α-MSH 66796-54-1, Proopiomelanocortin 82785-45-3, Neuropeptide Y 30853-26-7, Ghrelin, des-n-octanoyl derivs.  
 RL: BSU (Biological study, unclassified); BIOL (Biological study)  
 (centrally administered fatty acid synthase inhibitor effect on ghrelin secretion and its downstream effects)

REFERENCE COUNT: 34 THERE ARE 34 CITED REFERENCES AVAILABLE IN THE RE FORMAT RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 44 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
 ACCESSION NUMBER: 2005:473171 CAPLUS Full-text  
 DOCUMENT NUMBER: 143:38506  
 TITLE: Molecular forms of hypothalamic ghrelin and its regulation by fasting and 2-deoxy-D-glucose administration  
 Sato, Takanori; Fukue, Yoshihiko; Teranishi, Hitoshi; Yoshida, Yayoi; Kojima, Masayasu  
 Molecular Genetics, Institute of Life Sciences, Kurume University, Fukukawa, 839-0864, Japan  
 Endocrinology (2005), 146(6), 2510-2516  
 CODEN: ENDOAO; ISSN: 0013-7227  
 Endocrine Society  
 Journal  
 English  
 AB Ghrelin, an endogenous ligand for the GH secretagogue receptor, is a hormone expressed in stomach and other tissues, such as hypothalamus, testis, and placenta. This hormone acts at a central level to stimulate GH secretion and food intake. Little is known, however, about the mol. forms and physiol. roles of ghrelin within the hypothalamus. The authors detail the mol. forms, mRNA expression patterns, and peptide contents of ghrelin within the rat hypothalamus. Using the combination of reverse-phase HPLC and ghrelin-specific RIA, the authors determined that the rat hypothalamus contains both n-octanoyl-modified and des-acyl ghrelin. Fasting for 24 and 48 h significantly decreased ghrelin mRNA expression in the hypothalamus to 24% and 28% of control values, resp. Both n-octanoyl-modified and des-acyl ghrelin content in the hypothalamus decreased after 24 and 48 h of fasting. These results contrast the changes in gastric ghrelin after fasting, which decreased in content despite increased mRNA expression. Two hours after injection of 2-deoxy-D-glucose (2-DG), a selective blocker of carbohydrate metabolism, ghrelin peptide levels also decreased. Thus, induction of glucoprivic states, such as fasting and 2-DG treatment, decreased ghrelin gene expression and peptide content within the hypothalamus.

CC 2-6 (Mammalian Hormones)  
 Section cross-references: 18  
 IT Appetite  
 Stomach  
 Fasting  
 (mol. forms of hypothalamic ghrelin and its regulation in stomach forms of hypothalamic ghrelin and its regulation in stomach by fasting and deoxoglucose administration)

IT 50-99-7, D-Glucose, biological studies 67387-96-1, Melanin-concentrating hormone 82785-45-3, Neuropeptide Y 30853-26-7, Ghrelin 30853-26-7D, Ghrelin, n-octanoyl-modified and des-acyl derivs.  
 RL: BSU (Biological study, unclassified); BIOL (Biological study)  
 (mol. forms of hypothalamic ghrelin and its regulation in stomach by fasting and deoxoglucose administration)

REFERENCE COUNT: 21 THERE ARE 21 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 45 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
 ACCESSION NUMBER: 2005:59399 CAPLUS Full-text  
 DOCUMENT NUMBER: 142:132304  
 TITLE: Effects of Roux-en-Y gastric bypass surgery on fasting and postprandial concentrations of plasma ghrelin, peptide YY, and insulin  
 AUTHOR(S): Kornier, Judith; Bessler, Marc; Cirilo, L. J.; Connwell, Irene M.; Daud, Anna; Restuccia, Nancy L.; Wardlaw, Shazon L.  
 CORPORATE SOURCE: Department of Medicine, College of Physicians & Surgeons, Columbia University, New York, NY, 10032,

SOURCE: USA Journal of Clinical Endocrinology and Metabolism (2005), 90(1), 359-365  
CODEN: JCEMAZ; ISSN: 0021-972X  
Endocrine Society

PUBLISHER: Journal  
DOCUMENT TYPE: English

LANGUAGE:

AB To help understand the mechanisms by which weight loss is maintained after Roux-en-Y gastric bypass (RYGBP), we measured circulating concns. of total and bioactive octanoylated ghrelin, peptide YY (PYY), glucose, and insulin in the fasted state and in response to a liquid test meal in three groups of adult women: lean ( $n = 8$ ); weight-table 35 ± 5 mo after RYGBP ( $n = 12$ ; mean body mass index, 33 kg/m<sup>2</sup>); and matched to the surgical group for body mass index and age ( $n = 12$ ). Fasting plasma total ghrelin levels were nearly identical between RYGBP (425 ± 54 pg/ml) and the matched controls (424 ± 28 pg/ml) and highest in lean controls (564 ± 103 pg/ml). The response to the test meal was comparable between lean and RYGBP groups, with 27% and 20% maximal suppression, resp., whereas the magnitude of suppression was significantly diminished in the matched controls [17%] compared with the lean group. Fasting levels of octanoylated ghrelin were highest in the lean controls, 220 ± 36 pg/ml vs. 143 ± 27 in the RYGBP group ( $P = 0.05$ ) and 127 ± 12 pg/ml in the matched controls ( $P < 0.05$ ). The magnitude of maximal post-meal suppression of octanoylated ghrelin was more marked than with total ghrelin, but similar among groups, ranging from 44-47%. In response to the test meal, there was an early exaggerated rise in PYY in the RYGBP group, such that the peak PYY concentration was 163 ± 24 pg/ml compared with 58 ± 17 ( $P < 0.01$ ) and 77 ± 23 ( $P < 0.05$ ) in the matched and lean controls, resp.; area under the curve at 90 min was significantly greater compared with both control groups. Leptin and fasting insulin concns. and homeostasis model of assessment insulin resistance indexes were nearly identical between lean and RYGBP subjects and significantly higher in the body mass index-matched controls. In summary, the absence of a compensatory increase in ghrelin concns. that usually occurs with diet-induced weight loss, and the exaggerated postprandial PYY response after RYGBP, may contribute to weight loss and to the ability of an individual to maintain weight loss after this surgical procedure.

CC 14-14 (Mammalian Pathological Biochemistry)

Section cross-reference(s): 2

IT Body weight

(loss; Roux-en-Y gastric bypass surgery effect on fasting and postprandial plasma ghrelin, peptide YY, and insulin)

IT Appetite

(satiation; Roux-en-Y gastric bypass surgery effect on fasting and postprandial plasma ghrelin, peptide YY, and insulin)

IT 9004-10-8 Insulin, biological studies 106388-42-5, Peptide YY 169494-85-3, Leptin 304853-26-7, Ghrelin 304853-26-7D,

Ghrelin, octanoylated

RL: BSU (Biological study, unclassified); BIOL (Biological study (Roux-en-Y gastric bypass surgery effect on fasting and postprandial plasma ghrelin, peptide YY and insulin))

REFERENCE COUNT: 49 THERE ARE 49 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 46 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2005:2387 CAPLUS Full-Text

DOCUMENT NUMBER: 142:8680

TITLE: Transgenic mice overexpressing des-acyl ghrelin show small phenotypic changes  
Ariyasu, Hiroyuki; Takaya, Kazuhiko; Iwakura, Hiroshi; Hosoda, Hiroshi; Akamizu, Takashi; Arai, Yoji; Kanagawa, Kenji; Nakao, Kazuo; Kanzawa, Tamas L.; Culler, Michael D.

AUTHOR(S):

CORPORATE SOURCE: IPSEN Group, Milford, MA, USA

SOURCE: Neuroendocrinology (2005), 81(5), 339-349

CODEN: NUNDJ; ISSN: 0028-3835

CORPORATE SOURCE: Dep. Med. Clinical Sci., Kyoto Univ. Grad. Sch. Med., Kyoto, 606-8507, Japan  
SOURCE: Endocrinology (2005), 146(1), 355-364  
CODEN: ENDRAO; ISSN: 0013-7227  
Endocrine Society

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Ghrelin, a 28-amino acid acylated peptide, displays strong GH-releasing activity in concert with GHRH. The fatty acid modification of ghrelin is essential for the actions, and des-acyl ghrelin, which lacks the modification, has been assumed to be devoid of biol. effects. Some recent reports, however, indicate that des-acyl ghrelin has effects on cell proliferation and survival. In the present study, the authors generated two lines of transgenic mice bearing the preproghrelin gene under the control of chicken  $\beta$ -actin promoter. Transgenic mice overexpressed des-acyl ghrelin in a wide variety of tissues, and plasma des-acyl ghrelin levels reached 10- and 44-fold of those in control mice. They exhibited lower body wts. and shorter nose-to-anus lengths, compared with control mice. The serum GH levels tended to be lower, and the Serum IgF-1 levels were significantly lower in both male and female transgenic mice than control mice. The responses of GH to administered GHRH were normal, whereas those to administered ghrelin were reduced, especially in female transgenic mice, compared with control mice. These data suggest that overexpressed des-acyl ghrelin may modulate the GH-IGF-I axis and result in small phenotype in transgenic mice.

CC 2-6 (Mammalian Hormones)

IT Appetite

Blood plasma

Body weight

Cell proliferation

Development, mammalian postnatal

Growth, animal

Heart

Kidney

Sex

Stomach  
(des-acyl ghrelin effect on growth and GH-IGF axis and other factors in transgenic mice)

IT 9002-60-2, ACTH, biological studies 9002-67-9, LH 9002-68-0, FSH 9002-71-5, TSH 9002-72-6, Growth hormone 9004-10-8, Insulin, biological studies 9034-39-3, Somatotropin 51110-01-1, Somatostatin 67763-96-6, IGF-I 304853-26-7, Ghrelin 304853-26-7D, Ghrelin, des-acyl derivs.

RL: BSU (Biological study, unclassified); BIOL (Biological study (des-acyl ghrelin effect on growth and GH-IGF axis and other factors in transgenic mice))

REFERENCE COUNT: 46 THERE ARE 46 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT  
L99 ANSWER 47 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2005:1152686 CAPLUS Full-Text  
DOCUMENT NUMBER: 144:812  
TITLE: A Novel Growth Hormone Secretagogue-1<sub>a</sub> Receptor Antagonist That Blocks Ghrelin-Induced Growth Hormone Secretion but Induces Increased Body Weight Gain  
AUTHOR(S): Halim, Heather A.; Taylor, John E.; Dong, Jeese Z.; Shen, Yesiana; Datta, Rakesh; Abizaid, Alfonso; Diano, Sabrina; Horvath, Tamas L.; Culler, Michael D.  
CORPORATE SOURCE: IPSEN Group, Milford, MA, USA  
SOURCE: Neuroendocrinology (2005), 81(5), 339-349  
CODEN: NUNDJ; ISSN: 0028-3835

PUBLISHER:	S. Karger AG
DOCUMENT TYPE:	Journal
LANGUAGE:	English
AB	Ghrelin, the natural ligand for the growth hormone secretagogue-1a (GHS-1a) receptor, has received a great deal of attention due to its ability to stimulate weight gain and the hope that an antagonist of the GHS-1a receptor could be a treatment for obesity. We have discovered an analog of full-length human ghrelin, BIM-28163, which fully antagonizes GHS-1a by binding to but not activating the receptor. We further demonstrate that BIM-28163 blocks ghrelin activation of the GHS-1a receptor, and inhibits ghrelin-induced GH secretion <i>in vivo</i> . Unexpectedly, however, BIM-28163 acts as an agonist with regard to stimulating weight gain. These results may suggest the presence of an unknown ghrelin receptor that modulates ghrelin actions on weight gain. In keeping with our results on growth hormone (GH) secretion, BIM-28163 acts as an antagonist of ghrelin-induced Fos protein immunoreactivity (Fos-IR) in the medial arcuate nucleus, an area involved in the ghrelin modulation of GH secretion. However, in the dorsal medial hypothalamus (DMH), a region associated with regulation of food intake, both ghrelin and BIM-28163 act as agonists to upregulate Fos-IR. The observation that ghrelin and BIM-28163 have different efficacies in inducing Fos-IR in the DMH, and that concomitant administration of ghrelin and an excess of BIM-28163 results in the same level of Fos-IR as BIM-28163 administered alone may demonstrate that in the DMH both ghrelin and BIM-28163 act via the same receptor. If so, it is unlikely that this receptor is GHS-1a. Collectively, our findings suggest that the action of ghrelin to stimulate increased weight gain may be mediated by a novel receptor other than GHS-1a, and further imply that GHS-1a may not be the appropriate target for anti-obesity strategies.
CC	2-5 (Mammalian Hormones)
IT	(gain; GHS-1a receptor antagonist blocks ghrelin-induced growth hormone secretion but induces increased body weight gain)
IT	258279-04-8, Human Ghrelin 304853-26-7D, Ghrelin, analog RI: PAC (Pharmacological activity); THU (therapeutic use); BIOL (biological study); USES (uses) (GHS-1a receptor antagonist blocks ghrelin-induced growth hormone secretion but induces increased body weight gain)
REFERENCE COUNT:	39 THERE ARE 39 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT
L99	ANSWER 48 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN ACCESSION NUMBER: 2005:305176 CAPLUS Full-text DOCUMENT NUMBER: 143:131584 TITLE: Evaluation of blood active ghrelin and adipocytokines in patients with inflammatory bowel disease and liver cirrhosis AUTHOR (S): Oriishi, Tetsuharu; Itou, Minoru; Toyonaga, Atsushi; Sata, Michio CORPORATE SOURCE: The Second Department of Internal Medicine, Kurume University School of Medicine, Japan SOURCE: Shoka to Kyushu (2005), Volume Date 2004, 27(1), 39-43 CODEN: SHKEZ; ISSN: 0389-3626 PUBLISHER: Nippon Shoka Kyushu Gakkai DOCUMENT TYPE: Journal LANGUAGE: Japanese
AB	We evaluated blood active ghrelin, desacyl-ghrelin, leptin and adiponectin in patients with inflammatory bowel disease and liver cirrhosis. Subjects were 12 patients with Crohn's disease (CD), 17 patients with ulcerative colitis (UC), 14 patients with liver cirrhosis (LC), 10 elders, over 80 years old, and 8 healthy controls. We obtained blood sample in fasting morning and measured 16 times in patients with CD, 7 times in active phase and 9 times in inactive
PUBLISHER:	S. Karger AG
DOCUMENT TYPE:	Journal
LANGUAGE:	English
AB	Ghrelin was significantly lower in LC and in elders than in controls, although blood level of desacyl-ghrelin was not significantly different in any subject group compared with controls. Blood level of leptin was lower in CD than in controls and adiponectin was higher in LC than in controls. Score of BMI in CD and in elders was lower than in controls, and blood level of albumin, total cholesterol and BCA was lower in LC and in CD than in controls. Changing pattern of blood level of active ghrelin, desacyl-ghrelin, leptin, and adiponectin in each subject group compared with controls was different resp. Nutritional assessment was lower and active ghrelin was higher in active CD than in inactive CD, though no difference was seen between active UC and in remission UC. These results suggesting that mechanism of malnutrition is differ in each subject group resp. and measuring blood active ghrelin is useful for assessment of malnutrition.
CC	15-8 (Immunochemistry)
IT	Section cross-reference(s): 14
IT	Blood Cirrhosis Human Malnutrition Inflammatory bowel disease and liver cirrhosis
IT	57-88-5, Cholesterol, biological studies 169494-85-3, Leptin 304853-26-7, Ghrelin 304853-26-7D, Ghrelin, desacylated RL: BSU (Biological study, unclassified); BIOL (Biological study) (evaluation of blood active ghrelin and adipocytokines in patients with inflammatory bowel disease and liver cirrhosis)
L99	ANSWER 49 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN ACCESSION NUMBER: 2005:59342 CAPLUS Full-text DOCUMENT NUMBER: 142:23344 TITLE: Separate measurement of plasma levels of acylated and desacylated ghrelin in healthy subjects using a new direct ELISA assay AUTHOR (S): Akamizu, Takashi; Shinomiya, Toshiaki; Irako, Taiga; Fukunikatsu, Kangawa, Kenji; Yoshikai, Mikihiko; Nakai, Yoshihide; Nakai, CORPORATE SOURCE: Therapeutics, Translational Research Project, Department of Experimental Ghrelin Research, Research Center, Kyoto University Hospital, Faculty of Medicine, Kyoto University, Kyoto, 606-8507, Japan SOURCE: Journal of Clinical Endocrinology and Metabolism (2005), 90(1), 6-9 CODEN: JCENAZ; ISSN: 0021-972X PUBLISHER: Endocrine Society DOCUMENT TYPE: Journal LANGUAGE: English AB Two forms of ghrelin, acylated and desacyl, circulate in plasma. Although acylation is thought to be essential for ghrelin biol. activities, recent studies have suggested that desacyl ghrelin may also possess biol. activity. A new com. ELISA system has now enabled us to measure plasma levels of each of these two ghrelin forms sep. This assay system directly measures levels using small amts. of plasma. To evaluate the utility of this assay system, we measured the plasma levels of the two forms of ghrelin in healthy volunteers. Although acylated ghrelin levels were equivalent to those measured previously by RIA, desacyl ghrelin levels were lower than those expected from the total ghrelin levels previously determined by RIA. The ratios of acylated to desacyl ghrelin significantly correlated with previously determined acylated, but not desacyl, ghrelin levels. After BMI adjustment, the levels of

acylated, but not desacyl, ghrelin plasma levels were higher in female subjects than those in males. Several metabolic and hormonal parameters significantly correlated with either plasma acylated or desacyl ghrelin levels. These findings indicate that sep. measurements of the two ghrelin form levels may provide valuable information on their structure, gender differences, and physiol. implications.

#### CC 2-1 (Mammalian Hormones)

IT Blood analysis

Human

(sep. measurement of plasma levels of acylated and desacyl ghrelin in healthy subjects using a new direct ELISA assay and correlation with hormonal and metabolic parameters) 26 THERE ARE 26 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

REFERENCE COUNT: 26

INVENTOR(S): Ghigo, Ezio; Van der Lely, Aart Jan

PATENT ASSIGNEE(S): Theratechnologies Inc., Can.

SOURCE: PCT Int. Appl., 26 pp.

CODEN: PIXXD2

Patent English

DOCUMENT TYPE: LANGUAGE:

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.: WO 2003051389

KIND: A2

DATE: 20030526

APPLICATION NO.: WO 2002-CI1964

DATE: 20021218

PATENT NO.: WO 20030912

KIND: A3

DATE: 20030912

APPLICATION NO.: WO 2002-CA1964

DATE: 20021218

PATENT NO.: WO 2003051389

KIND: A2

DATE: 20030526

APPLICATION NO.: WO 2002-CI1964

DATE: 20021218

PATENT NO.: CA 2470235

KIND: A1

DATE: 20030626

APPLICATION NO.: CA 2002-2470235

DATE: 20021218

PATENT NO.: EP 1435814

KIND: A2

DATE: 20040915

APPLICATION NO.: EP 2002-787266

DATE: 20021218

PATENT NO.: R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, PT, SE, MC, PT,

IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, SK

PATENT NO.: US 20050414

KIND: A1

DATE: 20050428

APPLICATION NO.: JP 2003-152322

KIND: T

DATE: 20021218

PATENT NO.: CA 2001-2365704

KIND: A

DATE: 20011218

PATENT NO.: WO 2002-CI1964

KIND: W

DATE: 20021218

10/567406 AB The present invention relates to compns. containing unacetylated ghrelin and derivs. thereof and their uses in the control of glycemia in ageing patients, GH deficient patients, diabetic patients and obese patients.

IC ICM A61K038-22

ICCS A61P003-04; A61P003-10

CC 1-10 (Pharmacology)

Section cross-reference(s): 63

IT Body weight (controlling of; pharmaceutical compns. comprising unacylated ghrelin and therapeutic uses for metabolic disorders)

IT 304853-26-7D, Ghrelin, deacylation products

RU: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(pharmaceutical compns. comprising unacylated ghrelin and therapeutic uses for metabolic disorders)

IT Body weight

AB The present invention relates to compns. containing unacylated ghrelin in healthy subjects using a new direct ELISA assay and correlation with hormonal and metabolic parameters) 26 THERE ARE 26 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

REFERENCE COUNT: 26

INVENTOR(S): Ghigo, Ezio; Van der Lely, Aart Jan

PATENT ASSIGNEE(S): Theratechnologies Inc., Can.

SOURCE: PCT Int. Appl., 26 pp.

CODEN: PIXXD2

Patent English

DOCUMENT TYPE: LANGUAGE:

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.: WO 2001056592

KIND: A1

DATE: 20010809

APPLICATION NO.: WO 2001-DK64

DATE: 20010129 /

INVENTOR(S): Andersen, Maibritt Bansholm; Hansen, Birgit Sehested;

Ravn, Kirsten; Tullin, Soren; Thim, Lars

Novo Nordisk A/S, Den.

PATENT ASSIGNEE(S): Novo Nordisk A/S, Den.

SOURCE: PCT Int. Appl., 23 pp.

CODEN: PIXXD2

Patent

DOCUMENT TYPE: LANGUAGE:

FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

PATENT NO.: WO 2001056592

KIND: A1

DATE: 20010809

APPLICATION NO.: WO 2001-DK64

DATE: 20010129 /

INVENTOR(S): AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CZ, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KR, KG, KP, KR, KZ, LC, LR, LS, LT, LU, LV, MA, MD, MG, MN, MM, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TT, TZ, UA, UG, UZ, VN, YU, ZA, ZW

RW: GH, GK, KE, LS, MW, MZ, SD, SI, SZ, TZ, WG, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NI, PT, SE, TR, BF, BU, CF, CG, CI, CM, GA, GN, GR, ML, MR, NE, SN, TD, TG

PRIORITY APPLN. INFO.: DK 2000-161 A 20000201

AB Compds. that are ligands for the receptor GHS-R 1A, as well as pharmaceutically acceptable salts thereof, are useful for the manufacture of medicaments for the regulation of food intake.

ICM A61K038-17

ICCS A61K031-7076; A61P003-04

CC 1-11 (Pharmacology)

Section cross-reference(s): 2

ST appetite regulation growth hormone secretagogue receptor ligand

IT AIDS (disease)

(body wasting in, treatment of; use of compds. for regulation

of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)

IT Body weight

(regulation of; use of compds. for regulation of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)

	PATENT NO	KIND	APPLICATION	DATE
IT	WO 2007038678 A2		WO 2006-US37889 20060927	
	PRIORITY APPLN. INFO: US 2005-750771P US 2005-721557P US 2005-742904P		20051215 20050928 20051209	
	INT. PATENT CLASS IF.: A61K0038-22 [I, A]; A61K0038-22 [I, C]			
	BASIC ABSTRACT:			
	WO 2007038678 A2 UPAB: 20070719			
	NOVELTY - Ghrelin peptide analogs, or their salts are new.			
	DETAILED DESCRIPTION - Ghrelin peptide analogs of formula (R2R3)-A1-A2-A3-A4-A5-A6-A7-A8-A9-A10-A11-A12-A13-A14-A15-A16-A17-A18-A19-A20-A21-A22-A23-A24-A25-A26-A27-A28-RL, or their salts are new.			
IT	Disease, animal (use of compds. for regulation of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)			
IT	(wasting, in AIDS, treatment of; use of compds. for regulation of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)			
IT	9002-712-6, Somatotropin RL: ADV (Adverse effect, including toxicity); BPR (Biological process); BSU (Biological study, unclassified); BIOL (Biological study); PROC (Process) (deficiency and secretion of, stimulation of appetite in relation to; use of compds. for regulation of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)			
IT	58-61-7, Adenosine, biological studies 193079-69-5, NN703 267225-30-9, NNC 26-1187 301853-26-7D, Ghrelin homologs 3552B-95-9			
IT	RL: BAC (Biological activity or effector, except adverse); BSU (Biological study); USES (Uses) (use of compds. for regulation of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)			
REFERENCE COUNT: 3	THERE ARE 3 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT			
L99	ANSWER 52 OF 66	WPIX COPYRIGHT 2007	THE THOMSON CORP on STN	
	ACCESSION NUMBER: C2007-173901 [46]	WPIX		
	DOC. NO. CPTI: N2007-362182 [46]			
	DOC. NO. NON-CPTI:			
	TITLE: New ghrelin peptidyl analogs useful for e. g. stimulating growth hormone secretion, treating growth hormone deficient state, increasing muscle mass and bone density, treating sexual dysfunction			
	DERVENT CLASS: B04; S03			
	INVENTOR: COMSTOCK J M; CULLER M D; DONG Z X; SHEN Y (SCRC-C) SAS SOC CONSEILS RECH & APPL SCI; (COMS-I)			
	PATENT ASSIGNEE: COMSTOCK J M; (CULLER I) CULLER M D; (DONG-I) DONG Z X; (SHEN-I) SHEN Y			
	COUNTRY COUNT: 115			
	PATENT INFORMATION:			
	PATENT NO	KIND DATE	WEEK	LA PG MAIN IPC
	WO 2007038678	A2	20070405 (200746) * EN	110[0]
	APPLICATION DETAILS:			
	Membranes for radioligand binding studies were prepared by homogenization of			
	activity of (Lys(biotinyl117)ghrelin1 - 28-NH2 (IA) was tested as follows.			
	88			
	87			

CHO-K1 cells expressing the human recombinant GHS receptor. The homogenates were washed twice by centrifugation (35000 g/10 minutes) and the final pellets were resuspended in 50 mM Tris-HCl containing 2.5 mM MgCl<sub>2</sub> and 0.1% bovine serum albumin (BSA). For the selected assay, aliquots of approximately 4 ml were incubated with 0.05 nM (125I)ghrelin (200 Ci/mmol) with and without 0.05 ml of unlabeled competing test peptide. After approximately 60 minutes at 4 degreesC, the bound (125I)ghrelin was separated from the free ghrelin by rapid filtration which were pre-soaked in 0.5% polyethyleneamine/0.1% BSA. The filters were then washed 3 times with 5-ml aliquots of ice-cold 50 mM Tris-HCl and 0.1% BSA. (IA) Showed a Ki value of 0.07 nM.

USE - For stimulating growth hormone secretion in a subject; for treating growth hormone deficient state, for increasing muscle mass and bone density, for treating sexual dysfunction in males or females, for facilitating a weight gain, for facilitating maintenance of weight, physical functioning, recovery of physical function and/or appetite increase; for treating weight loss associated with the onset of cachexia (where the cachexia is incidental to the subject suffering from anorexia, bulimia, cancer, AIDS or chronic obstructive pulmonary disease), the frail or elderly, onset of Alzheimer's disease, due to chemotherapy, radiation therapy, temporary immobilization, permanent immobilization and dialysis; for treating or preventing post-operative ileus or chronic obstructive pulmonary diseases; for treating disease caused by excessive growth hormone secretion (where the excessive weight gain is a contributing factor of diseases e.g. hypertension, dyslipidemia, gall stones, osteoarthritis and cancers, Prader-Willi syndrome), for facilitation of loss of excessive body weight, for facilitating decrease and weight maintenance, for treating obesity, diabetes, complications of diabetes including retinopathy, and/or cardiovascular disorders; for treating inflammation in a subject; for treating inflammation associated with infectious process such as viral infection e.g. hepatitis A virus, human immunodeficiency virus; bacterial infection e.g. Staphylococcus aureus; parasitic infection, fungal infection; inflammation associated with liver-toxicity (where the liver toxicity is associated with cancer therapy e.g. apoptosis induction and/or chemotherapy), transplant rejection, burn, lung inflammation, and cancer; for treating loss of appetite caused by inflammation (low grade inflammation caused by aging); for treating inflammatory diseases (e.g. asthma, reactive arthritis, dermatitis, spondyarthritis, Sjogren's syndrome, Alzheimer's disease and atopic dermatitis), autoimmune disease (e.g. systemic lupus erythematosus, rheumatoid arthritis, systemic vasculitis, insulin dependent diabetes mellitus), psoriasis, Crohn's disease, inflammatory bowel disease, ulcerative colitis, Addison's disease, alopecia areata, celiac disease, thyroid disease, scleroderma) (claimed).

ADVANTAGE - The peptidyl analogs possess agonist or antagonist ghrelin activity, and it exhibits higher cell membrane binding affinity and is found to interact more efficiently with membrane bound receptors and thus are more biologically potent compared to native ghrelin. It achieves a beneficial effect in a subject by helping to cure or reduce the severity or reduces the likelihood of onset or severity a disease or disorder. It stimulates or suppresses growth hormone secretion in a subject.

MANUAL CODE: CPI: B04-301; B11-C0BE; B12-K0E1; B14-C03; B14-C09;  
B14-D01; B14-E08; B14-E10; B14-E11; B14-E12; B14-F01;  
B14-F02; B14-H01; B14-H02; B14-J01A; B14-J01B; B14-J05; B14-K01;  
B14-N01; B14-N03; B14-N11; B14-N12; B14-N17; B14-P04;  
B14-R02; B14-S01; B14-S04; B14-S16  
EPI: S03-E04E; S03-E14A1

ORGANIC CHEMISTRY - Preparation (disclosed): No general methods for the preparation of ghrelin peptidyl analogs (I) are given.

L99	ANSWER 53 OF 66	WPIX COPYRIGHT 2007	THE THOMSON CORP on STN
ACCESSION NUMBER:	2007-233319 [27]	WPIX	
DOC. NO. CPT:	C2007-103794 [27]		
TITLE:	New peptide or peptidomimetic compounds, useful for treating diseases such as anorexia, arthritis, inflammatory bowel disease, ulcerative colitis, obesity, hypertension, diabetes, and AIDS		
DERVENT CLASS:	B02: B04		
INVENTOR:	DONG Z X; EYNON J S; SHEN Y		
PATENT ASSIGNEE:	(SSCR-C) SAS SOC CONSILIS RECH & APPL SCI; (DONG-1) DONG Z X; (EYNO-1) EYNON J S; (SHEN-1) SHEN Y		
COUNTRY COUNT:	113		
PATENT INFORMATION:			
PATENT NO.	KIND DATE	WEEK	LA PG
WO 2007014258	A2 20070201 (200727) • EN 171[0]		MAIN IPC
APPLICATION DETAILS:			
PATENT NO.	KIND	APPLICATION	DATE
WO 2007014258 A2		WO 2006-US23002 20060724	
PRIORITY APPLN. INFO:	US 2005-701729P	20050722	
INT. PATENT CLASSIF.:	C07K0014-435 [1, C]; C07K0014-60 [1, A]; C12P0021-06 [1, A]; C12P0021-06 [1, C]		
IPC ORIGINAL:			
BASIC ABSTRACT: WO 2007014258 A2 UPAB: 20070426			
NOVELTY - Peptide or peptidomimetic compounds (I) or (II) and their salts are new.			
DETAILED DESCRIPTION - Peptide or peptidomimetic compounds of formula (I) or (II), and their salts are new. X = a group of formula (Xa), (Xb), or (Xc); Y = H or NR12N13; Z=C(O)- or -SO2-;			
r=1-8;			
R1, R3=H or 1-4C alkyl; R6, R9=optionally substituted 1-6C alkyl, acyl, alkylaryl, alkylarylkyl, or arylalkylaryl; R6, R9=optionally substituted 1-6C alkyl, or 2-CC alkynyl. Provided that R2 and R4 are not radical or optionally substituted 1-6C alkyl. Provided that R2 and R4 are not radical or formula (Xd), where Q is H or 1-4C alkyl.			
INDEPENDENT CLAIMS are also included for the following: (1) determining an ability of the compound to bind to growth hormone secretagogues (GHS), comprising measuring the rate of the compound to effect binding with receptor, fragment of receptor, polypeptide of the receptor fragment, or derivative of the polypeptide; (2) screening for a ghrelin agonist, comprising using the inventive compound or its salt in a competition experiment with test compounds;			
(3) screening for a ghrelin antagonist, comprising using the inventive compound or its salt to produce GHS receptor activity and then measuring the ability of a test compound to alter GHS receptor activity; (4) achieving a beneficial effect in a subject, comprising administering to the subject the inventive compound or its salt to patient;			
(5) stimulating growth hormone secretion in a subject, comprising administering to a subject a ghrelin agonist or its salt in an amount effective to produce a detectable increase in growth hormone secretion; (6) suppressing growth hormone secretion in a subject, comprising administering to			

a subject a ghrelin antagonist of formula (I) or (II) or its salt in an amount that is sufficient to produce a detectable decrease in growth hormone secretion;

(7) eliciting a ghrelin agonist or antagonist effect in a subject, comprising administering to a subject a ghrelin agonist or antagonist of formula (I) or (II) or its salt in an amount sufficient to produce a detectable decrease in growth hormone secretion; and

(8) promoting gastrointestinal motility in a subject, comprising administering to a subject a ghrelin antagonist of formula (I) or (II) or its salt in an amount that is sufficient to facilitate gastrointestinal motility.

ACTIVITY - Anabolic; Eating-Disorders-Gen; Cytostatic; Anti-HIV; Anabolic;

Dermatological; Osteopathic; Antiarthritis; Antinflammatory;

Anorectic; Hypotensive; Antidiabetic; Antilipemic;

Mechanism of Action - Ghrelin agonist; Ghrelin antagonist. Growth hormone release stimulator; Growth hormone release stimulator. (I) and (II) were tested for their ability to stimulate release of growth hormone. The compound was injected subcutaneously in 10-day old rats at a dose of 300 mg/kg. After 15 minutes, the growth hormone levels were measured and compared to growth hormone levels in rats injected with solvent control. No results are given.

USE - As ghrelin agonists for stimulating growth hormone secretion in a subject having disease or disorder accompanied by weight loss. As ghrelin antagonists for suppressing growth hormone in a subject having disease or condition characterized by excessive weight. For promoting gastrointestinal mobility in a subject suffering from post-operative gastrroparesis (which is incidental to the onset of diabetes or is brought about by chronic diabetic state). Also in screening for ghrelin agonist or antagonist. The diseases or disorders accompanied by weight loss include anorexia, bulimia, cancer cachexia, AIDS, AIDS wasting, cachexia, cardiovascular disease, osteoporosis, arthritis, systemic lupus erythematosus, inflammatory bowel disease, Crohn's Disease, ulcerative colitis, chronic renal failure, or wasting in frail elderly. The excessive weight is especially a contributing factor to a disease or condition including obesity, hypertension, diabetes, dyslipidemia, cardiovascular disease, gall stones, osteoarthritis, Prader-Willi Syndrome and cancer (all claimed). As functional ghrelin analogs both as research tool and/or as therapeutic agents. Also useful in e.g. screening for compounds active at the GHS receptor, for determining the presence of GHS receptor in a sample, or in preparing and examining the role or effect of ghrelin.

ADVANTAGE - The inventive compound is active at GS receptor. It is capable of binding to the receptor and MANUAL CODE: CPI: B06-B01; B06-D01; B07-D05; B10-A06; B10-A09B; B10-B01B; B11-C08E2; B12-K04E; B12-K04F1; B14-A02B1; B14-C09; B14-D02A2; B14-E08; B14-F10; B14-E11; B14-E12; B14-F01; B14-F02; B14-F06; B14-G01B; B14-G02D; B14-H01; B14-J05; B14-L01; B14-L06; B14-N01A; B14-N10; B14-N12; B14-N17; B14-S04; B14-S16; B14-S20A; TECH ORGANIC CHEMISTRY - Preparation: (I) and (II) are prepared by treating an intermediate containing indole and tert-butyl oxy carbonyl with a solution containing trifluoroacetic acid, evaporating the solution, triturating by adding cold ether to the residue and collecting the precipitate, and purifying the formed crude product.

Preferred Method: The stimulation of growth hormone secretion is indicated for treatment of a growth hormone deficient state, for increasing muscle mass, for increasing bone density, for sexual dysfunction in males or females, for facilitating a weight gain, for facilitating maintenance of weight for facilitating maintenance of physical functioning, for facilitating recovery of physical function, and/or facilitating appetite increase. The treatment for growth hormone deficient state includes chemotherapy, radiation therapy, temporary or permanent immobilization,

and dialysis. The suppression of growth hormone secretion is indicated for the treatment of disease or condition characterized by excessive growth hormone secretion, for facilitation of weight loss, for facilitation of appetite decrease, for facilitation of weight maintenance, for treating obesity, for treating diabetes, for treating complications of diabetes including retinopathy, and/or for treating cardiovascular disorders.

199 ANSWER 54 OF 66	WPIX COPYRIGHT 2007	THE THOMSON CORP on STN
ACCESSION NUMBER:	2005-100672 [11]	WPIX
DOC. NO. CPI:	C2005-033673 [11]	
TITLE:	New tetraline derivatives useful for the treatment of disorders regulated by ghrelin e.g. anorexia, cancer cachexia, eating disorders, age-related decline in body composition, weight gain, obesity and diabetes mellitus	
DERVENT CLASS:	B03; B05	
INVENTOR:	LIU B; LIU G; NELSON L T J; PATEL J R; SHAM H L; XIN Z;	
ZHAO H		
(LIUB-I) LIU B; (LIUG-I) LIU G; (NELS-I) NELSON L T J;		
(PAT-E-I) PATEL J R; (SHAM-I) SHAM H L; (XINZ-I) XIN Z;		
(ZHAO-I) ZHAO H; (ABBO-C) ABBOTT LAB		
COUNTRY COUNT:	1	
PATENT INFORMATION:		
PATENT NO.	KIND DATE	MAIN IPC
US 20050014794	A1 20050120 (20051)* EN 35(0)	
US 7115767	B2 20061003 (200665) EN	
APPLICATION DETAILS:		
PATENT NO.	KIND	APPLICATION DATE
US 20050014794 A1 Provisional		US 2003-488250P 20030718
US 20050014794 A1		US 2004-893484 20040716
PRIORITY APPLN. INFO:	US 2004-893484 20040716	
INT. PATENT CLASSIF.:		
IPC ORIGINAL:		
A61K0031-21 [I,C]; A61K0031-27 [I,A]; C01C0271-00 [I,C];		
C07C0271-06 [I,A]		
A61K0031-165 [I,C]; A61K0031-185		
IPC RECLASSIF.:		
[I,C]; A61K0031-195 [I,A]; A61K0031-275 [I,C];		
A61K0031-277 [I,A]; A61K0031-401 [I,A]; A61K0031-445 [I,C];		
C07D0211-00 [I,C]; C07D0211-06 [I,A]		
BASIC ABSTRACT:		
US 20050014794 A1 UPAB: 20050708		
NOVELTY - Tetraline derivatives (I-II) are new.		
DETAILED DESCRIPTION - Tetraline derivatives of formula (I-II) and their salts and derivatives are new. R <sub>1</sub> , R <sub>2</sub> = H, alkyl, aryl, arylalkyl, cycloalkyl, cycloalkylalkyl, cycloalkyl, cycloalkenylalkyl, heterocycle or heterocyclicalkyl; N(R <sub>1</sub> R <sub>2</sub> ) = heterocycle;		
R <sub>3</sub> -R <sub>6</sub> = H, alkoxy, alkoxyalkyl, alkyl, alkenyl, alkenyloxyalkyl, aryl, cyano, cycloalkyl, (halo)alkyl, heterocycle, (hydroxylalkyl, nitro, cyano, RaRbN-carboxyalkenyl, RaRbN-carboxyalkyl, RaRbN-sulfonyl, RaRb-alkyl, RaRb-alkyl, heterocycle, RCRDN-carboxy or RCRDN-sulfonyl;		
R <sub>7</sub> = H, alkenyl, alkyl, (alkoxy)carbonyl, aryl, hydroxy, haloalkyl, cycloalkyl, heterocycle, RCRDN-, RCRDN-carboxy or RCRDN-sulfonyl;		



the binding of (I) to either the receptor, a fragment of the receptor comprising ghrelin binding site, a polypeptide comprising the fragment or derivative of the polypeptide, where the ability of the analog to bind the receptor is measured. (I) is also useful for achieving a beneficial effect in a subject; and for stimulating growth hormone secretion (claimed). (I) is useful as a research tool which include determining the presence of GHs receptor in a sample or preparation, and examining the role of effect of ghrelin. (I) is further useful for screening both agonist and antagonist of ghrelin, which are used therapeutically, where ghrelin agonist is utilized for treating a growth hormone deficient state, increasing muscle mass and bone density, treating sexual dysfunction in males or females, facilitating a weight gain, maintenance of weight, maintenance of physical functioning, recovery of physical function, and/or appetite increase, where a weight gain, maintenance in weight, or appetite increase is particularly useful for a patient having a disease or disorder, or under going a treatment, accompanied by weight loss such as anorexia, bulimia, cancer cachexia, acquired immunodeficiency syndrome (AIDS), wasting, cachexia, and wasting in frail elderly, and examples of treatments accompanied by weight loss include chemotherapy, radiation therapy, temporary or permanent immobilization, and dialysis; and ghrelin antagonist is utilized to facilitate weight loss, appetite decrease, weight maintenance, treat obesity, diabetes, and complications of diabetes including retinopathy, and/or cardiovascular disorders, where excessive weight is a contributing factor to different diseases including hypertension, diabetes, dyslipidemias, cardiovascular disease, gall stones, osteoarthritis and certain forms of cancers, and bringing about a weight loss can be used, for e.g., to reduce the likelihood of such diseases and for treating such diseases.

ADVANTAGE - (I) induces growth hormone release from primary-culture pituitary cells in a dose-dependent manner without stimulating the release of other pituitary hormones. Unlike longer length ghrelin, (I) can be synthesized easily and has increased solubility in physiological buffers.

MANUAL CODE: CPT: B04-C01; B04-C01F; B14-A02; B14-A02B1; B14-C09;

B14-E12; B14-F01; B14-F02; B14-F06; B14-G03; B14-H01; B14-L06; B14-N01; B14-N03; B14-N12; B14-S04; D05-C12; D05-H17A5; D05-H18

#### TECH

BIOTECHNOLOGY - Preparation: (I) is prepared by standard biochemical synthesis involving introduction of nucleic acid into a cell and expression of the nucleic acids. Preferred Analog: In structure (A) or (B), X has a structure (C) where  $X_1 = -O-, -S-, -OC(O)-$ , or  $-CH_2-$ ; and R =  $-C(4-20)$  alkenyl,  $-C(4-20)$  substituted alkenyl,  $-C(4-20)$  substituted heteroalkyl, aryl, or alkylaryl. Preferably the structure of (I) is (A), where N = 0-11 preferably 0-6 or 0-3 and more preferably 0, and  $X_1 = -C(O)-$  or  $-NH(O)-$ , and R =  $-C(5-15)$  alky more preferably 0,  $-CH_2-6CH_3$ , where Z1 (if present) =  $-NH_2$ . ORGANIC CHEMISTRY - Preparation: (I) is synthesized by standard synthesis e.g. Vincent in Peptide and Protein Drug Delivery, New York, N.Y., Dekker, 1990.

SOURCE:	Roma, Italy. maibosso@tin.it Annals of Surgical Oncology, (2007) Vol. 14, No. 2, pp. 276-285.
Refs:	84
ISSN:	1068-9265 E-ISSN: 1534-4681 CODEN: ASONFA
COUNTRY:	United States
DOCUMENT TYPE:	Journal Article
FILE SEGMENT:	016 Cancer Drug Literature Index 037 Adverse Reactions Titles 005 General Pathology and Pathological Anatomy 009 Surgery
LANGUAGE:	English
SUMMARY LANGUAGE:	English
ENTRY DATE:	Entered STN: 16 Feb 2007 Last Updated on STN: 16 Feb 2007
ABSTRACT:	Cancer Cachexia (CC) is a multifactorial paraneoplastic syndrome characterized by anorexia, body weight loss, loss of adipose tissue and skeletal muscle, accounting for at least 20% of deaths in neoplastic patients. CC significantly impairs quality of life and response to anti-neoplastic therapies, increasing morbidity and mortality of cancer patients. Muscle wasting is the most important phenotypic feature of CC and the principal cause of function impairment, fatigue and respiratory complications, mainly related to a hyperactivation of muscle proteolytic pathways. Most current therapeutic strategies to counteract CC have proven to be only partially effective. In the last decade, the correction of anorexia, the inhibition of catabolic processes and the stimulation of anabolic pathways in muscle have been attempted pharmacologically with encouraging results in animal models and through preliminary clinical trials. However, data in the clinical setting are still scanty and non definitive. It is time to start prospective, randomized, controlled trials to evaluate which drugs are effective in counteracting the loss of lean of muscle mass and in improving nutritional status and quality of life in patients affected by cancer-related cachexia. ©COPYRGT. 2006 Society of Surgical Oncology.
CONTROLLED TERM:	Medical Descriptors: adipose tissue adrenal insufficiency: SI, side effect alopecia: SI, side effect anorexia: DT, drug therapy article biosynthesis blood pressure *cachexia: DM, disease management *cachexia: DT, drug therapy *cachexia: ET, etiology *cancer cachexia: DM, disease management *cancer cachexia: DT, drug therapy *cancer cachexia: ET, etiology cancer patient cancer: DT, drug therapy catabolism clinical trial combination chemotherapy coordination disorder: SI, side effect drowsiness: SI, side effect drug effect drug mechanism drug safety energy expenditure

energy metabolism  
 enteric feeding  
 experimental model  
 fatigue  
 fluid retention  
 functional disease  
 human  
 hyperglycemia: SI, side effect  
 impotence: SI, side effect  
 lung non small cell cancer: DT, drug therapy  
 monotherapy  
 nonhuman  
 nutritional status  
 \*paraneoplastic syndrome: DM, disease management  
 \*paraneoplastic syndrome: DT, drug therapy  
 \*paraneoplastic syndrome: ET, etiology  
 parenteral nutrition  
 peripheral edema: SI, side effect  
 phenotype  
 physical activity  
 protein degradation  
 pulse pressure  
 quality of life  
 respiratory tract disease  
 side effect: SI, side effect  
 peripheral edema: SI, side effect  
 thromboembolism: SI, side effect  
 vomiting: SI, side effect  
 weight reduction

**Drug Descriptors:**  
 cannabis derivative: PD, pharmacology  
 cyclooxygenase 2 inhibitor: PD, pharmacology  
 cytokine antibody: DT, drug therapy  
 cytokine  
 dipeptidyl carboxypeptidase inhibitor: DT, drug therapy  
 dipeptidyl carboxypeptidase inhibitor: PD, pharmacology  
 docetaxel: CB, drug combination  
 dronabinol: DT, drug therapy  
 dronabinol: PD, pharmacology  
 eranercept: CB, drug combination  
 etanercept: DT, drug therapy  
 dronabinol: AE, adverse drug reaction  
 dronabinol: CT, clinical trial  
 dronabinol: CM, drug comparison  
 dronabinol: DT, drug therapy  
 dronabinol: PD, pharmacology  
 fish oil: CB, drug combination  
 fish oil: DT, drug therapy  
 ghrelin: AB, adverse drug reaction  
 ghrelin: CT, clinical trial  
 ghrelin: DT, drug therapy  
 ghrelin: PD, pharmacology  
 Ghrelin: SC, subcutaneous drug administration  
 hormone receptor blocking agent: DT, drug therapy  
 hormone receptor blocking agent: PD, pharmacology  
 ibuprofen: CB, drug combination  
 ibuprofen: DT, drug therapy  
 icosapentaeanoic acid: CT, clinical trial

**CONTROLLED TERM:**  
 icosapentaeanoic acid: CM, drug comparison  
 icosapentaeanoic acid: DO, drug dose  
 icosapentaeanoic acid: DR, drug therapy  
 icosapentaeanoic acid: PO, oral drug administration  
 icosapentaeanoic acid: PD, pharmacology  
 infliximab: CB, drug combination  
 infliximab: DT, drug therapy  
 interleukin 12: PD, pharmacology  
 interleukin 15: PD, pharmacology  
 megestrol acetate: AE, adverse drug reaction  
 megestrol acetate: CT, clinical trial  
 megestrol acetate: CB, drug combination  
 megestrol acetate: CM, drug comparison  
 megestrol acetate: DR, drug therapy  
 megestrol acetate: PD, pharmacology  
 melanocortin receptor antagonist: DT, drug therapy  
 melanocortin receptor antagonist: PD, pharmacology  
 melatonin: CT, clinical trial  
 melatonin: CB, drug combination  
 melatonin: DT, drug therapy  
 melatonin: PO, oral drug administration  
 melatonin: PD, pharmacology  
 myostatin antibody: DT, drug therapy  
 myostatin antibody: IP, intraperitoneal drug administration  
 myostatin antibody: PD, pharmacology  
 n acetyl alpha intermedin[4-10]cyclo[4 norleucine 5  
 aspartic acid 7 [3 (2 naphthyl)alanine] 10 lysinamide]: DT,  
 drug therapy  
 n acetyl alpha intermedin[4-10]cyclo[4 norleucine 5  
 aspartic acid 7 [3 (2 naphthyl)alanine] 10 lysinamide]: PD,  
 pharmacology

nandrolone decanoate: CT, clinical trial  
 nandrolone decanoate: DR, drug therapy  
 nandrolone decanoate: IM, intramuscular drug administration  
 nandrolone decanoate: PD, pharmacology  
 oxandrolone: CT, clinical trial  
 oxandrolone: DT, drug therapy  
 oxandrolone: PD, pharmacology  
 pentoxifylline: CT, clinical trial  
 pentoxifylline: DT, drug therapy  
 pentoxifylline: PD, pharmacology  
 placebo  
 suramin: PD, pharmacology  
 rhalidomide: CT, clinical trial  
 thalidomide: DT, drug therapy  
 thalidomide: PD, pharmacology

**CAS REGISTRY NO.:**  
 (cannabis derivative) 38458-58-1: (docetaxel) 114977-28-5;  
 (dronabinol) 7663-50-5; (etanercept) 1852-3-60-0;  
 20001-86-1; (fish oil) 8016-13-5; (ghrelin) 258279-04-8;  
 30495-26-7; (ibuprofen) 15687-27-1; (icosapentaeanoic acid)  
 25378-27-2; 32839-30-8; (infliximab) 17027-31-3;  
 (interleukin 12) 130415-13-1; (megestrol acetate) 595-33-5;  
 (melatonin) 73-31-4; (myostatin) 197731-05-8; (n acetyl  
 alpha intermedin[4-10]cyclo[4 norleucine 5 aspartic acid 7  
 [3 (2 naphthyl)alanine] 10 lysinamide) 168482-23-3;  
 (nandrolone decanoate) 360-70-2; (oxandrolone) 53-39-4;  
 (pentoxifylline) 6493-05-6; (suramin) 129-46-4, 145-03-1;

CHEMICAL NAME:	(thalidomide) 50-35-1 Shu 9119	030      *Pharmacology 037      Drug Literature Index 006      Internal Medicine English Entered STN: 9 Feb 2006 Last Updated on STN: 6 Sep 2007 Medical Descriptors: *cachexia: DT, drug therapy *chronic obstructive lung disease clinical article clinical trial controlled clinical trial controlled study disease association drug infusion drug tolerability food intake grip strength growth hormone blood level hand grip human lean body weight lung function lung pressure muscle strength noradrenalin blood level note open study performance physical capacity prescription statistical significance walking *weight gain Drug Descriptors: *ghrelin: CF, clinical trial *ghrelin: DT, drug therapy *ghrelin: IV, intravenous drug administration *ghrelin: PD, pharmacology glucose: EC, endogenous compound growth hormone: EC, endogenous compound hydrocortisone: EC, endogenous compound insulin: EC, endogenous compound interleukin 6: EC, endogenous compound noradrenalin: EC, endogenous compound tumor necrosis factor alpha: EC, endogenous compound (ghrelin) 258279-04-8, 304853-26-7 84778-64-3: (growth hormone) 36992-73-1, 37261-05-3, 66419-50-9, 9002-72-6: (hydrocortisone) 50-23-7; (insulin) 9004-10-8; (nordrenalin) 1407-84-7, 51-41-2
L.99 ANSWER 57 OF 66 reserved on STN ACCESSION NUMBER: TITLE: AUTHOR: SOURCE:	EMBASE      COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN 2006380243      EMBASE      Full-text Ghrelin and neurohumoral antagonists in the treatment of Cachexia associated with cardiopulmonary disease. Laincaik M.; Andreas S.; Scanlon P.D.; Somers V.K.; Anker S.D.	
CORPORATE SOURCE:	M. Lainscak, Department of Internal Medicine, General Hospital Murska Sobota, Vrbnjska 6, SI-9000 Murska Sobota, Slovenia	
SOURCE:	Internal Medicine, (1 Aug 2006) Vol. 45, No. 13, pp. 837. Refs: 5 ISSN: 0918-2918      E-ISSN: 1349-7235      CODEN: IEDIEP	
COUNTRY:	Japan	
DOCUMENT TYPE:	Journal: Letter	
FILE SEGMENT:	006      Internal Medicine 037      Drug Literature Index	
LANGUAGE:	English	
ENTRY DATE:	Entered STN: 31 Aug 2006 Last Updated on STN: 31 Aug 2006	
CONTROLLED TERM:	Medical Descriptors: *cachexia: DI, diagnosis *cachexia: DT, drug therapy heart disease: DT, drug therapy lung disease prognosis chronic disease heart failure: DT, drug therapy chronic obstructive lung disease body composition muscle atrophy functional status pathophysiology human letter Drug Descriptors: *ghrelin: DT, drug therapy neurohormone: EC, endogenous compound hormone antagonist: DI, drug therapy neurohormone antagonist: DT, drug therapy neuropeptide carboxypeptidase inhibitor: DT, drug therapy dipeptidyl carboxypeptidase inhibitor: DT, drug therapy beta adrenergic receptor blocking agent: TO, drug toxicity unclassified drug (ghrelin) 258279-04-8, 304853-26-7	
CAS REGISTRY NO.:		
L.99 ANSWER 58 OF 66 reserved on STN ACCESSION NUMBER: TITLE:	EMBASE      COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN 2006041505      EMBASE      Full-text Prescription for patients with chronic obstructive pulmonary disease: Gain weight. Spiegler P.	
AUTHOR:	Clinical Pulmonary Medicine, (2006) Vol. 13, No. 1, pp. 69.	
SOURCE:	ISSN: 1068-0640      CODEN: CPMEF2 United States Journal: Note 015      Chest Diseases, Thoracic Surgery and Tuberculosis	
COUNTRY:	United States	
DOCUMENT TYPE:		
FILE SEGMENT:		

Refs: 16	ISSN: 0012-3692	CODEN: CHETBF	LANGUAGE: English
COUNTRY: United States	DOCUMENT TYPE: Journal; Editorial	ENTRY DATE: 006 Internal Medicine	SUMMARY LANGUAGE: English
FILE SEGMENT: 015 Chest Diseases, Thoracic Surgery and Tuberculosis	037 Drug Literature Index	ENTERED STN: 18 Feb 2005	LAST UPDATED ON STN: 18 Feb 2005
LANGUAGE: English	Entered STN: 20 Oct 2005	LAST UPDATED ON STN: 20 Oct 2005	ENTRY DATE: 015
CONTROLLED TERM: Medical Descriptors:	*chronic obstructive lung disease	Entered STN: 20 Oct 2005	Entered STN: 20 Oct 2005
	*pulmonary hypertension	Last Updated on STN: 20 Oct 2005	Last Updated on STN: 20 Oct 2005
	*cachexia: DT, drug therapy	Medical Descriptors:	Medical Descriptors:
	protein function		
	protein synthesis		
	enterochromaffin cell		
	protein secretion		
	food intake		
	satiety		
	hypothalamus		
	protein expression		
	body mass		
	drug effect		
	lung function		
	dietary intake		
	appetite		
	human		
	clinical trial		
	editorial		
	priority journal		
	Drug Descriptors:		
	*ghrelin: CT, clinical trial		
	*ghrelin: DT, drug therapy		
	*ghrelin: EC, endogenous compound		
	*ghrelin: IV, intravenous drug administration		
	neuropeptide Y: EC, endogenous compound		
	cefquinome: EC, endogenous compound		
	noradrenalin: EC, endogenous compound		
	(ghrelin): 258279-04-8, 304853-26-7; (neuropeptide Y)		
	8278-45-3, 83389-17-7; (cefquinome) 84957-30-2;		
	(noradrenalin) 1407-84-7, 51-41-2		
L99 ANSWER 60 OF 66	EMBASE	COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN	Full-text
ACCESSION NUMBER: 2005057323	EMBASE	TITLE: Ghrelin: More than a natural GH secretagogue and/or an orexigenic factor.	
AUTHOR: Ghigo E.; Broglio F.; Arvat E.; Maccario M.; Papotti M.; Muccioli G.		AUTHOR: Ghigo E.; Broglio F.; Arvat E.; Maccario M.; Papotti M.; Muccioli G.	
CORPORATE SOURCE: E. Ghigo, Div. of Endocrinology and Metabolism, Department of Internal Medicine, University of Turin, C.so Dogliotti 14, 10126 Torino, Italy; ezio.ghigo@unict.it		CORPORATE SOURCE: E. Ghigo, Div. of Endocrinology and Metabolism, Department of Internal Medicine, University of Turin, C.so Dogliotti 14, 10126 Torino, Italy; ezio.ghigo@unict.it	
SOURCE: Clinical Endocrinology, (2005) Vol. 62, No. 1, pp. 1-17.		SOURCE: Clinical Endocrinology, (2005) Vol. 62, No. 1, pp. 1-17.	
COUNTRY: United Kingdom	DOCUMENT TYPE: Journal; General Review	Refs: 273	Refs: 273
FILE SEGMENT: 003 Endocrinology	Entered STN: 0300-0664 CODEN: CLENAO	Journal: General Review	Journal: General Review
037 Drug Literature Index	Entered STN: 0300-0664 CODEN: CLENAO	Entered STN: 0300-0664 CODEN: CLENAO	Entered STN: 0300-0664 CODEN: CLENAO

growth  
 glucose metabolism  
 heart function  
 memory  
 contextual memory  
 cell proliferation  
 clinical medicine  
 growth hormone deficiency: DI, diagnosis  
 cachexia: TH, therapy  
 eating disorder: TH, therapy  
 obesity: ET, etiology  
 human  
 nonhuman  
 review  
 priority journal  
 Drug Descriptors:  
 \*ghrelin  
 \*growth hormone secretagogue  
 \*appetite stimulant  
 peptide hormone  
 ligand  
 growth hormone secretagogue receptor  
 receptor subtype  
 growth hormone secretagogue receptor 1a  
 serine  
 hormone derivative  
 ghrelin derivative  
 prolactin  
 corticotropin  
 unclassified drug  
 (ghrelin) 238279-04-8, 304853-26-7; (serine) 56-45-1,  
 6898-95-7; (prolactin) 12585-34-1, 50647-00-2, 9002-62-4;  
 (corticotropin) 11136-52-0, 9002-60-2, 9061-27-2

L99 ANSWER 61 OF 66 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN  
 ACCESSION NUMBER: 2004248737 EMBASE Full-text  
 TITLE: Is there a role of ghrelin in preventing catabolism?  
 AUTHOR: Janssen J.A.M.J.L.; van der Ley J.J.; Lamberts S.W.J.  
 MC: Dr. J.A.M.J.L. Janssen, Dept. of Internal Medicine, Erasmus  
 MC: Dr. Molenveldtplein 40, 3000 CA Rotterdam, Netherlands.  
 j.a.m.j.l.janssen@erasmusmc.nl  
 SOURCE: Journal of Endocrinological Investigation, (2004) Vol. 27,  
 No. 4, pp. 400-403.  
 Refs: 23  
 ISSN: 0391-4097 CODEN: JEIND7

COUNTRY: Italy  
 DOCUMENT TYPE: Journal: (Short Survey)  
 FILE SEGMENT: 003 Endocrinology  
 016 Cancer  
 017 Public Health, Social Medicine and Epidemiology  
 018 Cardiovascular Diseases and Cardiovacular Surgery  
 037 Drug Literature Index  
 LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 ENTRY DATE: Entered STN: 28 Jun 2004  
 ABSTRACT: Catabolism is a metabolic process in which muscle and fat cell tissues

are broken down in their constituent parts to provide nutrients and energy for the body. Whilst undoubtedly a potent stimulator of GH secretion in pharmacological doses, at present no clear physiological role for ghrelin in the regulation of GH secretion has been identified in man. In addition to its GH-releasing properties, ghrelin stimulates food intake and adipogenesis. The role of ghrelin has been extensively studied in three human models of catabolism: anorexia nervosa, cardiac cachexia and cancer cachexia. In this review we discuss the role of ghrelin in the etiology and treatment of catabolism using these three human models of catabolism. In the presence of clear catabolism in all the three conditions plasma total ghrelin levels are increased, suggesting that ghrelin does not increase food intake and/or anabolism in these circumstances. In addition, it is at present unknown whether administration of additional ghrelin in these conditions may reduce (or attenuate) the development of cachexia. In conclusion, the anabolic effects of ghrelin in man have still to be demonstrated. ©COPRGT. 2004, Editrice Kurtis.

## CONTROLLED TERM:

Medical Descriptors:  
 \*anorexia nervosa: DT, drug therapy  
 \*anorexia nervosa: ET, etiology  
 \*anorexia nervosa: PC, prevention  
 \*cachexia: CO, complication  
 \*cachexia: DT, drug therapy  
 \*cachexia: ET, etiology  
 \*cachexia: PC, prevention  
 catabolism  
 muscle cell  
 adipocyte  
 nutrient supply  
 growth hormone release  
 growth hormone  
 food intake  
 lipogenesis  
 disease model  
 biosynthesis  
 pathogenesis  
 diet restriction  
 wasting syndrome: CO, complication  
 wasting syndrome: DT, drug therapy  
 wasting syndrome: ET, etiology  
 wasting syndrome: PC, prevention  
 heart failure  
 malignant neoplastic disease  
 human  
 nonhuman  
 rat  
 controlled study  
 short survey  
 Drug Descriptors:

\*ghrelin: DT, drug therapy  
 \*ghrelin: EC, endogenous compound  
 growth hormone: EC, endogenous compound  
 leptin: EC, endogenous compound  
 placebo  
 (ghrelin) 256279-04-8, 304853-26-7; (growth hormone)  
 36992-73-1, 37267-05-3, 6619-50-9, 9002-72-6

L99 ANSWER 62 OF 66 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN  
 ACCESSION NUMBER: 2005042536 EMBASE Full-text  
 TITLE: GH and GH secretagogues: Clinical perspectives and safety.

**AUTHOR:** Aimaretti G.; Baldelli R.; Corneli G.; Bellone S.; Rovere S.; Croce C.; Ragazzoni F.; Giordano R.; Arvat E.; Bona G.; Ghigo E.

**CORPORATE SOURCE:** Dr. E. Ghigo, Div. of Endocrinology and Metabolism, Department of Internal Medicine, University of Turin, C.so Dogliotti 14, 10126 Torino, Italy. [ezio.ghigo@unito.it](mailto:ezio.ghigo@unito.it)

**SOURCE:** Pediatric Endocrinology Reviews, (2004) Vol. 2, No. SUPPL. 1, pp. 86-92.

**Refs:** 51

**ISSN:** 1565-4753

**COUNTRY:** Israel  
**DOCUMENT TYPE:** General Review  
**FILE SEGMENT:** 003  
**007**  
**037**  
**038**

**LANGUAGE:** English  
**SUMMARY LANGUAGE:** English  
**ENTRY DATE:** Entered STN: 10 Feb 2005  
Last Updated on STN: 10 Feb 2005

**ABSTRACT:** The diagnosis and treatment of growth hormone deficiency (GHD), as well as the possibility of counteracting somatopause and age-related changes in body composition, structural functions, and metabolism, prompted interest in potential clinical uses of GH-releasing hormone (GHRH) and GH secretagogues (GHS). GHD often reflects hypothalamic GHRH deficiency and it has been clearly demonstrated that the age-related decline in the function of the GH/IGF-I axis reflects a reduction in hypothalamic function as evidenced by the preservation of the releasable pool of pituitary GH in aged subjects. The effectiveness of recombinant human GH (rhGH) is well established, but it is also recognized that GH replacement does not mimic physiological GH secretion which theoretically would be restored by GHRH and/or GHS. At present, it has been clearly demonstrated that GHRH and/or GHS represent reliable tools for the diagnosis of GHD. On the other hand, neither GHRH nor GHS has been shown to provide effective alternatives to rhGH for the treatment of GHD. Although GHRH and/or GHS represent the most logical approaches for the restoration of the GH/IGF-I axis to a youthful level of activity and for counteracting the somatopause, this hypothesis has never been proven definitively. Conceptually, GHRH replacement would be the most physiological approach and its safety is guaranteed, provided an appropriate dose is used, in order to avoid hyperactivity of the GH/IGF-I axis. However, a long-acting preparation is needed. On the other hand, GHS, e.g., Ghrelin analogues, could be considered as a function of their selectivity of action. However, Ghrelin has a wide spectrum of endocrine and non-endocrine actions at both central and peripheral levels. Thus, non-selective GHS, although available in orally active forms, could elicit unforeseen side effects. Previous studies with GHRH and/or GHS in aging patients provided encouraging results. However, it still remains to be definitely demonstrated that aged subjects would benefit from chronic treatment with these molecules.

**CONTROLLED TERM:**

- \* growth hormone deficiency: DI, diagnosis
- \* growth hormone deficiency: DT, drug therapy
- childhood disease: DI, diagnosis
- childhood disease: DT, drug therapy
- adult disease: DI, diagnosis
- adult disease: DT, drug therapy
- drug safety
- hormone response
- growth hormone release

**Medical Descriptors:**

- \* growth hormone releasing factor: AE, adverse drug reaction
- \* growth hormone releasing factor: CT, clinical trial
- \* growth hormone releasing factor: CB, drug combination
- \* growth hormone releasing factor: DI, drug interaction
- \* growth hormone releasing factor: DT, drug therapy
- \* growth hormone releasing factor: PK, pharmacokinetics
- \* growth hormone releasing factor: PD, pharmacology
- \* growth hormone releasing factor: IV, intravenous drug administration
- \* growth hormone releasing factor: PO, oral drug administration
- \* growth hormone releasing factor: PA, parenteral drug administration
- \* growth hormone releasing factor: SC, subcutaneous drug administration
- \* growth hormone secretagogue: AE, adverse drug reaction
- \* growth hormone secretagogue: CB, drug combination
- \* growth hormone secretagogue: DI, drug interaction
- \* growth hormone secretagogue: DT, drug therapy
- \* growth hormone secretagogue: PD, pharmacology
- \* growth hormone secretagogue: IV, intravenous drug administration
- \* growth hormone secretagogue: PO, oral drug administration
- ghrelin: CB, drug combination
- ghrelin: PD, pharmacology
- ghrelin derivative: CB, drug combination
- arginine: CB, drug combination
- arginine: PD, pharmacology
- arginine: IV, intravenous drug administration
- Pyridostigmine: CB, drug combination
- Pyridostigmine: PD, pharmacology
- Pyridostigmine: PO, oral drug administration
- propranolol: CB, drug combination

propranolol: PD, pharmacology  
galanin: CB, drug combination  
galanin: PD, pharmacology  
histidyl dextro tryptophylalantryptophyl dextro  
phenylalanlysinamide; CB, drug combination  
histidyl dextro tryptophylalantryptophyl dextro  
phenylalanlysinamide; PD, pharmacology  
histidyl dextro tryptophylalantryptophyl dextro  
phenylalanlysinamide: IV, intravenous drug administration  
growth hormone  
somatomedin C  
somatomedin binding protein 3  
recombinant growth hormone: DT, drug therapy  
ibutamoren: CT, clinical trial  
ibutamoren: DO, drug dose  
ibutamoren: PK, Pharmacokinetics  
ibutamoren: PD, pharmacology  
ibutamoren: PO, oral drug administration  
recombinant growth hormone releasing factor[1-29]: AE, adverse drug reaction  
growth hormone releasing factor[1-29]: CT, clinical trial  
growth hormone releasing factor[1-29]: CB, drug combination  
growth hormone releasing factor[1-29]: DT, drug therapy  
growth hormone releasing factor[1-29]: PD, pharmacology  
growth hormone releasing factor[1-29]: IV, intravenous drug administration  
growth hormone releasing factor[1-29]: SC, subcutaneous drug administration  
growth hormone releasing hormone derivative: PD,  
pharmacology  
subcutaneous drug administration SC,  
alendronic acid: CT, clinical trial  
alendronic acid: CB, drug combination  
alendronic acid: DT, drug therapy  
alendronic acid: PD, pharmacology  
unclassified drug  
(growth hormone releasing factor) 83930-13-6, 9034-39-3;  
(ghrelin) 258279-04-8, 304853-26-7; (arginine) 1119-34-2,  
15595-35-4, 7004-12-8, 74-19-3; (pyridostigmine) 101-56-8,  
155-97-5; (propranolol) 13013-17-1, 318-98-9, 3506-09-0,  
4199-09-1, 525-66-6; (galanin) 88813-36-9; histidyl dextro  
tryptophylalantryptophyl dextro phenylalanlysinamide  
87616-84-0; (growth hormone) 36932-73-1, 37267-05-3,  
66419-50-, 9002-72-; (sonatomedin C) 67763-96-6;  
(ibutamoren) 159152-10-0; (growth hormone releasing  
factor[1-29]) 90830-28-7; (alendronic acid) 66376-56-1  
MK 0677

CAS REGISTRY NO.:  
CHEMICAL NAME:  
199 ANSWER 63 OF 66 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN  
ACCESSION NUMBER: 200330461 EMBASE Full-text  
TITLE: Patent developments in anabolic agents for treatment of bone diseases.  
AUTHOR: Wos J.A.; Lundy M.W.  
CORPORATE SOURCE: J.A. Wos, Procter and Gamble Pharmaceuticals, 8700 Mason-Montgomery Road, Mason, OH 45040-8006, United States.  
SOURCE: wos.i@epg.com  
Expert Opinion on Therapeutic Patents, (1 Aug 2003) Vol. 13, No. 8, pp. 1141-1156.

Refs: 70 ISSN: 154-3776 CODEN: EOTPEG  
COUNTRY: United Kingdom  
DOCUMENT TYPE: Journal: General Review  
FILE SEGMENT: 030 Pharmacology  
031 Arthritis and Rheumatism  
033 Orthopedic Surgery  
037 Drug Literature Index  
038 Adverse Reactions Titles  
039 Pharmacy  
LANGUAGE: English  
SUMMARY LANGUAGE: English  
ENTRY DATE: Entered STN: 4 Sep 2003 Last Updated on STN: 4 Sep 2003  
ABSTRACT: A review of the patent literature encompassing the past 3 years (1-aprx. 2000-2003) in the area of bone anabolic therapies for treatment of osteoporosis and related diseases is described. A variety of potential therapeutics are covered, as well as improvement attempts on the first approved bone anabolic agent, recombinant human parathyroid hormone (rPTH; teriparatide, Forsteo®, Eli Lilly & Co.). The patent literature suggests that multiple bioavailable anabolic agents to the market and that a variety of new targets are also being evaluated for further development.  
CONTROLED TERM:  
Medical Descriptors:  
\*metabolic bone disease: DT, drug therapy  
\*metabolic bone disease: SI, side effect  
\*osteoporosis: DT, drug therapy  
\*osteoporosis: SI, side effect  
\*osteosarcoma: SI, side effect  
drug approval  
drug delivery system  
drug marketing  
drug targeting  
drug efficacy  
hypercalcemia: SI, side effect  
osteosarcoma: SI, side effect  
drug structure  
drug half life  
human  
clinical trial  
review  
Drug Descriptors:  
\*anabolic agent: AE, adverse drug reaction  
\*anabolic agent: CT, clinical trial  
\*anabolic agent: AD, drug administration  
\*anabolic agent: AN, drug analysis  
\*anabolic agent: CB, drug combination  
\*anabolic agent: CM, drug comparison  
\*anabolic agent: DV, drug development  
\*anabolic agent: IH, inhalation drug administration  
\*anabolic agent: DT, drug therapy  
\*anabolic agent: PR, pharmaceuticals  
\*anabolic agent: PK, pharmacokinetics  
\*anabolic agent: PD, pharmacology  
\*anabolic agent: I, pharmacology  
\*anabolic agent: PO, oral drug administration  
\*anabolic agent: SC, subcutaneous drug administration  
recombinant human parathyroid hormone: AB, adverse drug reaction  
recombinant human parathyroid hormone: AD, drug administration

recombinant human parathyroid hormone: DT, drug therapy  
 recombinant human parathyroid hormone: PR, pharmacokinetics  
 recombinant human parathyroid hormone: SC, subcutaneous  
 drug administration  
 parathyroid hormone: AE, adverse drug reaction  
 parathyroid hormone: CT, clinical trial  
 parathyroid hormone: AD, drug administration  
 parathyroid hormone: CB, drug combination  
 parathyroid hormone: CM, drug comparison  
 parathyroid hormone: DR, drug therapy  
 parathyroid hormone: EC, endogenous compound  
 parathyroid hormone: PR, pharmacokinetics  
 parathyroid hormone: PD, pharmacology  
 parathyroid hormone: LH, inhalational drug administration  
 parathyroid hormone: PO, oral drug administration  
 parathyroid hormone: SC, subcutaneous drug administration  
 parathyroid hormone[1-34]: AE, adverse drug reaction  
 parathyroid hormone[1-34]: AD, drug administration  
 parathyroid hormone[1-34]: DT, drug therapy  
 parathyroid hormone[1-34]: PR, pharmacokinetics  
 parathyroid hormone[1-34]: SC, subcutaneous drug administration  
 bisphosphonic acid derivative: CB, drug combination  
 bisphosphonic acid derivative: DR, drug therapy  
 bisphosphonic acid derivative: PD, pharmacology  
 alendronic acid: CB, drug combination  
 alendronic acid: DR, drug therapy  
 risedronic acid: CB, drug combination  
 risedronic acid: DT, drug therapy  
 risedronic acid: PD, pharmacology  
 parathyroid hormone related protein: AE, adverse drug reaction  
 parathyroid hormone related protein: CM, drug comparison  
 parathyroid hormone related protein: DT, drug therapy  
 parathyroid hormone related protein: PR, pharmacokinetics  
 parathyroid hormone related protein: PD, pharmacology  
 parathyroid hormone derivative: AE, adverse drug reaction  
 parathyroid hormone derivative: CT, clinical trial  
 parathyroid hormone derivative: AD, drug administration  
 parathyroid hormone derivative: CB, drug combination  
 parathyroid hormone derivative: CM, drug comparison  
 parathyroid hormone derivative: DR, drug therapy  
 parathyroid hormone derivative: PR, pharmacokinetics  
 parathyroid hormone derivative: PK, pharmacodynamics  
 parathyroid hormone derivative: PD, pharmacology  
 parathyroid hormone derivative: IH, inhalational drug administration  
 parathyroid hormone derivative: PO, oral drug  
 parathyroid hormone derivative: SC, subcutaneous drug  
 parathyroid hormone[1-84]: AE, adverse drug reaction  
 parathyroid hormone[1-84]: CT, clinical trial  
 parathyroid hormone[1-84]: AD, drug administration  
 parathyroid hormone[1-84]: CM, drug comparison  
 parathyroid hormone[1-84]: DT, drug therapy  
 parathyroid hormone[1-84]: PR, pharmacokinetics  
 parathyroid hormone[1-84]: PD, pharmacology

parathyroid hormone[1-84]: SC, subcutaneous drug administration  
 calcium antagonist: AN, drug analysis  
 calcium antagonist: CB, drug combination  
 calcium antagonist: DF, drug therapy  
 calcium antagonist: PD, pharmacology  
 2 chloro 6 (3 [1,1 dimethyl 2 (2 naphthyl) ethylamino] 2 hydroxypropoxy benzonitrile: AN, drug analysis  
 2 chloro 6 (3 [1,1 dimethyl 2 (2 naphthyl) ethylamino] 2 hydroxypropoxy benzonitrile: CB, drug combination  
 2 chloro 6 (3 [1,1 dimethyl 2 (2 naphthyl) ethylamino] 2 hydroxypropoxy benzonitrile: DR, drug therapy  
 2 chloro 6 (3 [1,1 dimethyl 2 (2 naphthyl) ethylamino] 2 hydroxypropoxy benzonitrile: PD, pharmacology  
 estrogen: CB, drug combination  
 estrogen: DT, drug therapy  
 estrogen: PD, pharmacology  
 growth hormone: EC, endogenous compound  
 growth hormone receptor: EC, endogenous compound  
 recombinant growth hormone: DT, drug therapy  
 recombinant growth hormone: SC, subcutaneous drug administration  
 prednisone: AE, adverse drug reaction  
 prednisone: PO, oral drug administration  
 glucocorticoid: AE, adverse drug reaction  
 glucocorticoid: PO, oral drug administration  
 growth hormone secretagogue: DR, drug therapy  
 growth hormone secretagogue: PD, pharmacology  
 ghrelin derivative: DV, drug development  
 ghrelin derivative: DT, drug therapy  
 ghrelin derivative: PD, pharmacology  
 ghrelin: DV, drug development  
 ghrelin: DT, drug therapy  
 ghrelin: PD, pharmacology  
 ibutamoren: AN, drug analysis  
 ibutamoren: DV, drug development  
 ibutamoren: DR, drug therapy  
 ibutamoren: PD, pharmacology  
 ibutamoren: PO, oral drug administration  
 somatomedin: DV, drug development  
 somatomedin: DT, drug therapy  
 somatomedin: PD, pharmacology  
 hydroxymethylglutaryl coenzyme A reductase inhibitor: CT, clinical trial  
 hydroxymethylglutaryl coenzyme A reductase inhibitor: AN, drug analysis  
 hydroxymethylglutaryl coenzyme A reductase inhibitor: CB, drug combination  
 hydroxymethylglutaryl coenzyme A reductase inhibitor: DT, drug therapy  
 hydroxymethylglutaryl coenzyme A reductase inhibitor: PD, pharmacology  
 phosphodiesterase inhibitor: AN, drug analysis  
 phosphodiesterase inhibitor: DR, drug therapy  
 phosphodiesterase inhibitor: PD, pharmacology

prostaglandin derivative: AN, drug analysis  
 prostaglandin derivative: DT, drug therapy  
 prostaglandin derivative: PD, pharmacology  
 oxytocin: DR, drug therapy  
 oxytocin: PD, pharmacology  
 oxytocin derivative: DR, drug therapy  
 oxytocin derivative: PD, pharmacology  
 unindexed drug  
 unclassified drug

JTC 22  
 (parathyroid hormone) 12584-96-2; 68893-82-3; 9002-64-6;  
 (parathyroid hormone)[1-(34I)] 1258-68-5; 5223-67-4;  
 (alendronic acid) 66376-36-1; (isopropionic acid)  
 10542-24-6; 122456-82-6; (2 chloro 6 [3] [1,1 dimethyl 2 (2  
 naphthyl) ethylamino] 2 hydroxypropoxy)benzonitrile)  
 284025-33-2; 324523-20-8; (growth hormone) 36992-73-1;  
 37261-05-3; 66419-50-9; 9002-72-6; (prednisone) 53-03-2;  
 (ghrelin) 238279-04-8; 304853-26-7; (leutotamoren)  
 159752-10-0; (oxytocin) 50-56-6; 54577-94-5  
 (1) Forsee; (2) Fosamax; (3) Acetone; (4) Nps 2143; (5) Jtc  
 22; (6) Mk 0677  
 COMPANY NAME:  
 (1) Lilly; (2) Instituto Gentili; (3) Norwich Eaton; (4)  
 NPS; (5) Japan Tobacco; (6) Merck; Tanabe; Ono; Procter and  
 Gamble; Alcon; Allergan; Bristol Myers Squibb; Hoechst  
 Marion Roussel; Bayer; Pfizer; Novartis

L99 ANSWER 64 OF 66 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN  
 ACCESSION NUMBER: 2003459309 EMBASE Full-text  
 TITLE: Ghrelin and the Endocrine Pancreas.  
 AUTHOR: Brogiolo F.; Gottero C.; Prodani F.; Volante M.;  
 Destefanis S.; Gauna C.; Muccio G.; Papotti M.; Van Der  
 Lely A.J.; Ghigo E.  
 CORPORATE SOURCE: Dr. E. Ghigo, Div. of Endocrinology and Metabolism,  
 Department of Internal Medicine, University of Turin, 14  
 10126 Turin, Italy. ezioghigo@unito.it  
 SOURCE: Endocrine, (2003) Vol. 22, No. 1, pp. 19-24.  
 Refs: 61  
 ISSN: 0969-711X CODEN: EOCRES

COUNTRY: United States  
 DOCUMENT TYPE: Journal: General Review  
 FILE SEGMENT: 003 Endocrinology  
 030 Pharmacology  
 037 Drug Literature Index  
 048 Gastroenterology  
 LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 ENTRY DATE: Entered STN: 4 Dec 2003  
 Last Updated on STN: 4 Dec 2003

ABSTRACT: Ghrelin is a 28-amino-acid peptide predominantly produced by the stomach, while substantially lower amounts derive from other tissues including the pancreas. It is a natural ligand of the GH secretagogue (GHS) receptor (GHS-R1a) and strongly stimulates GH secretion, but acylation in serine 3 is needed for its activity. Ghrelin also possesses other endocrine and nonendocrine actions reflecting central and peripheral GHS-R distribution including the pancreas. The wide spectrum of ghrelin activities includes orexigenic effect, control of energy expenditure, and peripheral, gastroenteropancreatic actions. Circulating ghrelin levels mostly reflect gastric secretion as indicated by evidence that they are reduced by 80% after gastrectomy and even after gastric by-pass surgery. Ghrelin secretion is

increased in anorexia and cachexia but reduced in obesity, a notable exception being Prader-Willi syndrome. The negative association between ghrelin secretion and body weight is emphasized by evidence that weight increase and decrease reduces and augments circulating ghrelin levels in anorexia and obesity, respectively, and agrees with the clear negative association between ghrelin and insulin levels. In fact, ghrelin secretion is increased by fasting whereas it is decreased by glucose load as well as during euglycemic clamp but not after arginine or free fatty acid load in normal subjects; in physiological conditions, however, the most remarkable inhibitory input on ghrelin secretion is represented by somatostatin as well as by its natural analog cortistatin that concomitantly reduce  $\beta$ -cell secretion. This evidence indicates that the endocrine pancreas plays a role in directly or indirectly modulating ghrelin secretion. As anticipated, ghrelin, in turn, is expressed within the endocrine pancreas, although it is still matter of debate if it is expressed by  $\beta$ -,  $\alpha$ -, or non- $\alpha$ /non- $\beta$  cells. Moreover, GHS-R1a expression in the pancreas has been demonstrated by many authors. Some impact of synthetic GHS on insulin secretion and glucose metabolism had been reported in both animal and human studies. Depending on dose and experimental conditions ghrelin has been shown able to inhibit or stimulate insulin secretion in animals. In humans, ghrelin administration is followed by transient inhibition of insulin levels that surprisingly follows persistent increase in plasma glucose levels suggesting that ghrelin would also directly or indirectly activate glycogenolysis. Current studies indicate that ghrelin also blunts the insulin response to arginine but not that to oral glucose load in humans. These acute effects of ghrelin are independent of any cholinergic mediation and are not shared by synthetic, peptides GHS indicating they are likely mediated by a non-GHS-R1a receptor. These acute effects of ghrelin on insulin secretion would be short-lasting, and it has to be remembered that long-term treatment with synthetic non-peptide GHS in healthy elderly subjects was followed by insulin resistance. In all, it is already clear that ghrelin has remarkable impact in modulating insulin secretion and glucose metabolism. Insulin and ghrelin secretions seem linked by a negative functional relationship that strengthens the hypothesized role of ghrelin in participating in the management of the neuroendocrine and metabolic response to variations in energy balance.

CONTROLLED TERM:  
 Medical Descriptors:  
 \*hormone action  
 \*pancreas function  
 hormone release  
 hormone receptor interaction  
 growth hormone release  
 acylation  
 protein modification  
 appetite  
 anorexia  
 hormone blood level  
 stomach secretion  
 gastrectomy  
 stomach bypass  
 stomach surgery  
 cachexia  
 obesity  
 Prader Willi syndrome  
 body weight  
 insulin blood level  
 diet restriction  
 glucose tolerance test  
 pancreas islet beta cell

protein expression  
insulin release  
glucose metabolism  
glucose blood level  
glycogenolysis  
cholinergic activity  
aging  
energy balance  
food intake  
drug activity  
human  
nonhuman  
review  
priority journal  
Drug Descriptors:  
\*ghrelin: EC, endogenous compound  
\*hormone derivative: DO, drug dose  
\*hormone derivative: PD, pharmacology  
\*ghrelin derivative: DO, drug dose  
\*ghrelin derivative: PD, pharmacology  
\*ghrelin derivative: PO, oral drug administration  
growth hormone secretagogue receptor 1a: EC, endogenous compound  
growth hormone secretagogue receptor: EC, endogenous compound  
hormone derivative: PO, oral drug administration  
somatostatin derivative: DO, drug dose  
somatostatin derivative: PD, pharmacology  
cortistatin: PD, pharmacology  
growth hormone secretagogue: PD, pharmacology  
growth hormone secretagogue: PO, oral drug administration  
insulin: EC, endogenous compound  
glucose: EC, endogenous compound  
unclassified drug

**ABSTRACT:** Ghrelin is a 28-amino acid residue endogenous growth hormone secretagogue. Intensive investigations revealed that the N-terminus tetrapeptide, having octanoyl group at Ser(3), is the minimum active core. In this study, we further explored the structure-function relationships of the active N-terminus portion of ghrelin using a C-terminal mobilization assay. The smallest and most potent ghrelin derivative we have found so far is 5-aminopentanoyl-Ser(Octyl)-Phe-Leu-aminoethylamide, showing comparable activity to the natural molecule. In the process of modifying the active core, the ghrelin-derived short analogues emerged structurally close to pentidyl growth hormone secretagogues. The N-terminus modification suggested that Gly(1)-Ser(2) unit works as a spacer, forming adequate distance between N( $\alpha$ )-amino group and n-octanoyl group. Replacement of 3rd and 4th amino acid residues to D-isomer suggested that the N-terminal dipeptide contributes to shape the biologically active geometry by effecting conformation of residues in positions 3 and 4. ©COPYRIGHT. 2001 Academic Press.

**CONTROLLED TERM:**

\*Medical Descriptors:  
\*growth hormone release  
amino acid sequence  
protein conformation  
geometry  
hormone structure  
peptide synthesis  
priority journal  
Drug Descriptors:  
\*growth hormone  
\*ghrelin derivative  
unclassified drug  
(growth hormone) 36992-73-1, 37267-05-3, 66419-50-9,  
9002-72-6

**CAS REGISTRY NO.:** 199 ANSWER 66 OF 66 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2001019512 EMBASE Full-text  
**TITLE:** Structure - Function studies on the new growth hormone-releasing peptide, ghrelin: Minimal sequence of ghrelin necessary for activation of growth hormone secretagogue receptor 1a.  
**AUTHOR:** Bednarek M.A.; Seigner S.D.; Pong S.-S.; McKee K.K.; Hreniuk D.L.; Silva M.V.; Warren V.A.; Howard A.D.; Van der Ploeg L.H.Y.; Heck J.V.  
**CORPORATE SOURCE:** M.A. Bednarek, Department of Medicinal Chemistry, Merck Research Laboratories, R50G-141, P.O. Box 2000, Rahway, NJ 07065, United States; maria\_bednarek@merck.com  
**SOURCE:** Journal of Medicinal Chemistry, (16 Nov 2000) Vol. 43, No. 23, pp. 4370-4376.  
**Refs:** 18  
**COUNTRY:** United States  
**DOCUMENT TYPE:** Journal; Article  
**FILE SEGMENT:** Pharmacology  
**LANGUAGE:** English  
**SUMMARY LANGUAGE:** English  
**ENTRY DATE:** Entered STN: 1 Feb 2001  
**ABSTRACT:** The recently discovered growth hormone secretagogue, ghrelin, is a potent agonist at the human growth hormone secretagogue receptor 1a (hGHSR1a).

**COUNTRY:** United States  
**DOCUMENT TYPE:** Journal; Article  
**FILE SEGMENT:** 003 Endocrinology  
029 Biochemical and Biophysical Research Communications, (2001) Vol. 284, No. 3, pp. 655-659.  
**Refs:** 12  
**ISSN:** 0006-291X CODEN: BBRCA  
**Entered STN:** 25 Oct 2001

To elucidate structural features of this Peptide necessary for efficient binding to and activation of the receptor, several analogues of ghrelin with various aliphatic or aromatic groups in the side chain of residue 3, and several short peptides derived from ghrelin, were prepared and tested in a binding assay and in an assay measuring intracellular calcium elevation in HEK-293 cells expressing hGHSR1A. Bulky hydrophobic groups in the side chain of residue 3 turned out to be essential for maximum agonist activity. Also, short peptides encompassing the first 4 or 5 residues of ghrelin were found to functionally activate hGHSR1A as efficiently as the full-length ghrelin. Thus the entire sequence of ghrelin is not necessary for activity; the Gly-Ser-Ser-in-octanoyl-Phe segment appears to constitute the "active core" required for agonist potency at hGHSR1A.

CONTROLED TERM: Medical Descriptors:

\*structure activity relation  
amino acid sequence  
drug structure  
drug activity

drug synthesis

drug receptor binding  
assay  
calcium cell level

human controlled study

human cell

article

Drug Descriptors:

\*growth hormone releasing factor derivative: AN, drug  
analysis  
\*growth hormone releasing factor derivative: CM, drug  
comparison  
\*growth hormone releasing factor derivative: DV, drug  
development  
\*growth hormone releasing factor derivative: PD,  
pharmacology  
\*ghrelin derivative: AN, drug analysis  
\*ghrelin derivative: CM, drug comparison  
\*ghrelin derivative: DV, drug development  
\*ghrelin derivative: PD, pharmacology  
\*growth hormone releasing factor receptor: EC, endogenous  
compound  
calcium: EC, endogenous compound  
pralmorelin: AN, drug analysis  
pralmorelin: CM, drug comparison  
pralmorelin: PD, pharmacology  
pralmorelin: PD, pharmacology  
growth hormone releasing peptide 1: AN, drug analysis  
growth hormone releasing peptide 1: CM, drug comparison  
hexarelin: AN, drug analysis  
hexarelin: CM, drug comparison  
hexarelin: PD, pharmacology  
ibutamoren: AN, drug analysis  
ibutamoren: CM, drug comparison  
ibutamoren: DV, drug development  
ibutamoren: PD, pharmacology  
unclassified drug  
CAS REGISTRY NO.: 140103-51-1; (ibutamoren) 159752-10-0  
CHEMICAL NAME: Mk 0677

## SEARCH HISTORY

=> d his nofile

(\*FILE 'HOME' ENTERED AT 13:57:23 ON 20 SEP 2007)

(\*FILE 'CAPLUS' ENTERED AT 13:57:30 ON 20 SEP 2007)

(\*FILE 'REGISTRY' ENTERED AT 13:59:56 ON 20 SEP 2007)

(\*FILE 'CAPLUS' ENTERED AT 14:00:10 ON 20 SEP 2007)

(\*FILE 'CAPLUS' ENTERED AT 14:00:10 ON 20 SEP 2007)

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845463-47-0/BI OR 845463-48-1/BI OR 845463-49-2/BI OR 845463-50-5/BI OR 845463-51-6/BI OR 845463-52-7/BI OR 845463-53-8/BI OR 845463-54-9/BI OR 845463-55-0/BI OR 845463-56-1/BI OR 845463-57-2/BI OR 845463-58-3/BI OR 845463-59-4/BI OR 845463-60-7/BI OR 845463-61-8/BI OR 845463-62-9/BI OR 845463-63-0/BI OR 845463-64-1/BI OR 845463-65-2/BI OR 845463-66-3/BI OR 845463-67-4/BI OR 845463-68-5/BI OR 845463-69-6/BI OR 845463-70-9/BI OR 845463-71-0/BI OR 845463-72-1/BI OR 845463-73-2/BI OR 845463-74-3/BI OR 845463-75-4/BI OR 845463-76-5/BI OR 845463-77-6/BI OR 845463-78-7/BI)

D SCAN

FILE 'STNGUIDE' ENTERED AT 14:08:12 ON 20 SEP 2007

FILE 'MEDLINE' ENTERED AT 14:10:04 ON 20 SEP 2007

L24 471 SEA ABB=ON HOLST LANGE B?/AU OR LANGE B?/AU OR HOLST B?/AU

L25 845 SEA ABB=ON HANSEN C?/AU

L26 300 SEA ABB=ON COPENHAGEN H?/AU OR NILSSON H?/AU

L27 0 SEA ABB=ON GHRERLIN

L28 2304 SEA ABB=ON GHRERLIN

L29 0 SEA ABB=ON PEPTIDE HORMONES /CT (L)AA/CT

L30 2202 SEA ABB=ON PEPTIDE HORMONES /CT

L31 96078 SEA ABB=ON PEPTIDES /CT

L32 2754 SEA ABB=ON CACHEXIA /CT

L33 553 SEA ABB=ON WASTING SYNDROME /CT

L34 34 SEA ABB=ON 1.28 AND (L30 OR L31) AND (L32 OR L33)

L35 D TRIAL 1-5

L36 8287 SEA ABB=ON EATING /CT (L)DE/CT

L37 4131 SEA ABB=ON APPETITE /CT

L38 106 SEA ABB=ON L30 AND PY-2002

FILE 'STNGUIDE' ENTERED AT 14:15:03 ON 20 SEP 2007

FILE 'MEDLINE' ENTERED AT 14:19:47 ON 20 SEP 2007

D PY 106

L38 98 SEA ABB=ON L28 AND L37

L39 526 SEA ABB=ON L30(L) (AD OR PD OR TU OR PK)/CT

L40 124 SEA ABB=ON L39 AND (L32 OR L33 OR L35 OR L36)

L41 121 SEA ABB=ON L39 AND (L32 OR L33 OR L35 OR L36) AND L28

L42 13 SEA ABB=ON L39 AND L32 AND L28

L43 9 SEA ABB=ON (L24 OR L25 OR L26) AND L28

L44 D TRIAL 1-9

L45 318 SEA ABB=ON L39/MAJ

L46 1 SEA ABB=ON L34 AND L28

L47 66 SEA ABB=ON L33 AND L45

L48 20 SEA ABB=ON L36 AND L45

L49 1 SEA ABB=ON L28 AND L30 AND L33

L50 748646 SEA ABB=ON NEOPLASMS-NNT /CT (L)TH /CT

L51 1 SEA ABB=ON (L35 OR L36) AND L45 AND L50

L52 725014 SEA ABB=ON ANALOG? OR SECRETAGOG? OR DERIVATI?

L53 19 SEA ABB=ON L28 (W/LIKE

L54 1 SEA ABB=ON L53 AND (L32 OR L33 OR L35 OR L36)

L55 642 SEA ABB=ON L28 AND L30 AND L52

L56 47 SEA ABB=ON L55 AND L39 AND (L32 OR L33 OR L35 OR L36)

L57 D KWIC 1-3

L58 195 SEA ABB=ON L28 (SAL)L52

16 SEA ABB=ON L30 AND L57 AND (L32 OR L33 OR L35 OR L36)

D TRIAL 1-16

D QUE

10/567406

6 SEA ABB=ON L28(1A)L52 AND L30 AND (L32 OR L33 OR L35 OR L36)

FILE 'EMBASE' ENTERED AT 14:32:16 ON 20 SEP 2007

E GHRELIN/CT

E E3+ALL

2434 SEA ABB=ON GHRELIN/CT

7 SEA ABB=ON GHRELIN DERIVATIVE/CT

E GHRELIN DERIVATIVE/CT

410 SEA ABB=ON HOLST LANGE B?/AU OR LANGE B?/AU OR HOLST B?/AU

638 SEA ABB=ON HANSEN C?/AU

259 SEA ABB=ON COPENHAGEN H?/AU OR NILSSON H?/AU

8 SEA ABB=ON (L62 OR L63 OR L64) AND (L60 OR L61)

D TRIAL L61-7

E CACHEXIA /CT

E E3+ALL

E CACHEXIA /CT

14 SEA ABB=ON CANCER CACHEXIA/CT OR CANCER CACHEXIA SYNDROME /CT

3660 SEA ABB=ON CACHEXIA/CT

109 SEA ABB=ON L60 AND (L66 OR L67)

D TRIAL 1-5

167 160 (L) (AD OR DT OR PK OR DO OR PD) /CT

168 160 (L) AND L60

169 160 (L) (DT OR PC) /CT

170 3 SEA ABB=ON L66 AND L60

171 721 SEA ABB=ON L67 (L) (DT OR PC) /CT

172 42 SEA ABB=ON L69 AND L71

173 8 SEA ABB=ON L69/MAJ AND L71/MAJ

FILE 'WPIX' ENTERED AT 14:37:23 ON 20 SEP 2007

174 191 SEA ABB=ON HOLST LANGE B?/AU OR LANGE B?/AU OR HOLST B?/AU

175 453 SEA ABB=ON HANSEN C?/AU

176 157 SEA ABB=ON COPENHAGEN H?/AU OR NILSSON H?/AU

177 1 SEA ABB=ON L74 AND L75 AND L76

D TRIAL

FILE 'STNGUIDE' ENTERED AT 14:37:58 ON 20 SEP 2007

FILE 'LWPI' ENTERED AT 14:38:45 ON 20 SEP 2007

E B04-B04D+ALL/MC

E B04-C01+ALL/MC

E B04-H06+ALL/MC

E B04-L04+ALL/MC

E B11-C08E+ALL/MC

E B11-K04A+ALL/MC E B12-M04+ALL/MC

E B14-E1B+ALL/MC

E B14-H01+ALL/MC

E B14-L01+ALL/MC

E S03-E14H+ALL/MC

E S03-E14H+ALL/MC

FILE 'STNGUIDE' ENTERED AT 14:39:57 ON 20 SEP 2007

FILE 'LWPI' ENTERED AT 14:40:51 ON 20 SEP 2007

E B12-K04A+ALL/MC

E B12-M04+ALL/MC

FILE 'WPIX' ENTERED AT 14:43:38 ON 20 SEP 2007

178 94984 SEA ABB=ON (B14-H01+NT/MC OR C14-H01+NT/MC OR B12-G07/MC OR C1-G07/MC)

3107 SEA ABB=ON CACHEXIA/B1,ABEX OR CACHECTIC/B1,ABEX

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L80      570 SEA ABB=ON B14-E11B/MC OR C14-E11B/MC  
L81      212 SEA ABB=ON GRELIN/B1 ABEX  
L82      542701 SEA ABB=ON ANALOG?/BI ABEX OR SECRETAGOG?/BI ABEX OR DERIVATI?  
          /BI ABEX

L83      25 SEA ABB=ON (L79 OR L80) AND L81  
L84      23 SEA ABB=ON L81 (IA) L82  
L85      10 SEA ABB=ON L84 AND (L79 OR L80)  
L86      10 SEA ABB=ON (L74 OR L75 OR L76) AND L81  
L87      8 SEA ABB=ON (L74 OR L75 OR L76) AND (L84 OR (L81 AND (L79 OR  
          L80)))  
L88      8 SEA ABB=ON (L87 OR L77)  
L89      3 SEA ABB=ON L85 AND L88

FILE 'STNGUIDE' ENTERED AT 14:46:28 ON 20 SEP 2007  
FILE 'CAPLUS' ENTERED AT 14:49:01 ON 20 SEP 2007  
D QUE L22

FILE 'MEDLINE' ENTERED AT 14:49:01 ON 20 SEP 2007  
D QUE L43

FILE 'EMBASE' ENTERED AT 14:49:02 ON 20 SEP 2007  
D QUE L65

FILE 'WPIX' ENTERED AT 14:49:02 ON 20 SEP 2007  
D QUE L88

FILE 'MEDLINE, CAPLUS, WPIX, EMBASE' ENTERED AT 14:49:03 ON 20 SEP 2007  
L90      18 DUP REM L43 L22 L88 L65 (12 DUPLICATES REMOVED)  
ANSWERS '1-9' FROM FILE MEDLINE  
ANSWERS '10-14' FROM FILE CAPLUS  
ANSWERS '15-17' FROM FILE WPIX  
ANSWER '18' FROM FILE EMBASE  
D IALL 1-9  
D IBIB AB HITIND 10-14  
D IALL ABEO TECH 15-17  
D IALL 18

FILE 'STNGUIDE' ENTERED AT 14:49:41 ON 20 SEP 2007  
FILE 'CAPLUS' ENTERED AT 14:50:53 ON 20 SEP 2007  
D QUE L20  
30 SEA ABB=ON L20 NOT L22

FILE 'MEDLINE' ENTERED AT 14:50:54 ON 20 SEP 2007  
D QUE L42  
D QUE L49  
D QUE L51  
D QUE L54  
D QUE L59  
21 SEA ABB=ON (L42 OR L49 OR L51 OR L54 OR L59) NOT L43

FILE 'EMBASE' ENTERED AT 14:50:56 ON 20 SEP 2007  
D QUE L61  
D QUE L70  
D QUE L73  
0 SEA ABB=ON L61,L70,73 NOT L65

FILE 'WPIX' ENTERED AT 14:50:58 ON 20 SEP 2007  
D QUE L85

=&gt;